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Introduction

1. CCHS content is comprised of three components:
   
a. **Core content** is asked of all respondents and remains relatively stable over time;
b. **Theme content** is asked of all respondents and varies from year to year;
c. **Optional content** is chosen by health regions but is usually coordinated at the provincial level. An optional content selection process is carried out each year.

2. Question text in **bold** font is read to the respondent. Text in normal font is not read to the respondent. Interviewer instructions are prefaced by the word "INTERVIEWER", and are not read aloud.

3. Question text in **bold** font enclosed by brackets ( ) is read to the respondent at the discretion of the interviewer.

4. The options “Don’t Know” (DK) and “Refusal” (RF) are allowed on every question unless otherwise stated. However, the response categories are not read aloud.

5. External variable names are displayed in the questionnaire. Those names, highlighted in grey, are used in the microdata files.

6. Flow charts of the questions for all of the modules are available upon request (cchs-escc@statcan.ca or (613) 951-1746)
Contact component

Note: The following module only includes part of the questions asked during the CCHS interview. It includes what we believe may be of interest for data users.

Contact

CN_N01 INTERVIEWER: Record method of interview.

1 Telephone
2 Personal

(DK, R are not allowed)

CN_N02 INTERVIEWER: Have you made contact?

1 Yes
2 No

(Go to CN_END)

(DK, R are not allowed)

CN_END

Interviewer introduction

II_R01 Hello, I'm [calling] from Statistics Canada. My name is …

INTERVIEWER: Introduce yourself using both your given and last names. Press <Enter> to continue.

(DK, R are not allowed)

II_END

Language of preference

LP_Q01 Would you prefer to continue in English or in French?

ADM_LHH INTERVIEWER: Previous response was ["English" / "French" / "Other"].

1 English
2 French
3 Other

(Go to LP_END)

(Go to LP_END)

(DK, R are not allowed)
INTERVIEWER: Select respondent’s preferred non-official language. If necessary, ask: (What language would you prefer?)

03 Chinese  17 Cantonese
04 Italian   18 Hindi
05 Punjabi   19 Mandarin
06 Spanish   20 Persian (Farsi)
07 Portuguese 21 Russian
08 Polish    22 Ukrainian
09 German   23 Urdu
10 Vietnamese 24 Inuktitut
11 Arabic   25 Hungarian
12 Tagalog  26 Korean
13 Greek    27 Serbo-Croatian
14 Tamil    28 Gujarati
15 Cree      29 Dari
16 Afghan
90 Other - Specify

(DK, R are not allowed)

Initial contact

IC_R01 I’m calling regarding the Canadian Community Health Survey. All information collected in this survey will be kept strictly confidential.

INTERVIEWER: Press <Enter> to continue.

(DK, R are not allowed)
Household component

Note: The following module only includes part of the questions asked during the CCHS interview. It includes what we believe may be of interest for data users.

Roster introduction

RS_R01  The next few questions ask for important basic information about the people in your household.

INTERVIEWER: Press <Enter> to continue.

(DK, R are not allowed)

RS_END

Usual Roster

USU_Q01  What are the names of all persons who usually live here?

USU_END

"Other" Roster 1

RS_Q04  Are there any other persons who usually live here but are now away at school, in hospital, or somewhere else?

1  Yes
2  No  (Go to OTH1_END)
DK, R  (Go to OTH1_END)

OTH1_Q01  What are the names of the other people who live or stay here?

(DK, R and null are not allowed)

OTH1_END

Age Without Date of Birth

ANDB_Q01  What is [respondent name]'s age?

| | | | Age in years
(MIN: 0) (MAX: 130)

(DK, R are not allowed)

ANDB_END
**Sex**

SEX_Q01 INTERVIEWER: Enter [respondent name]'s sex.

DHH_SEX If necessary, ask: (Is [respondent name] male or female?)

1  Male
2  Female

(DK, R are not allowed)

**Marital status**

MSNC_Q01 What is [respondent name]'s marital status? Is [he/she]:

INTERVIEWER: Read categories to respondent.

1  ... married?
2  ... living common-law?
3  ... widowed?
4  ... separated?
5  ... divorced?
6  ... single, never married?

**Canadian Forces**

CAF_Q01 Is [respondent name] a full time member of the regular Canadian Armed Forces?

1  Yes
2  No

(DK, R are not allowed)

**Relationship without confirmation**

RNC_Q1 What is the relationship of: [respondent name] [(Text sex, age)] to: [respondent name]? [(Text sex, age)]

01  Husband/Wife
02  Common-law partner
03  Father/Mother (Go to RNC_Q2A)
04  Son/Daughter (Go to RNC_Q2B)
05  Brother/Sister (Go to RNC_Q2C)
06  Foster father/mother
07  Foster son/daughter
08  Grandfather/mother
09  Grandson/daughter
10  In-law (Go to RNC_Q2D)
11  Other related (Go to RNC_Q2E)
12  Unrelated (Go to RNC_Q2F)
RNC_Q2A What is the relationship of: [respondent name] [Text sex, age]
to: [respondent name]? [Text sex, age]

Is that a(n):
1 ... birth father/mother?
2 ... step father/mother?
3 ... adoptive father/mother?

RNC_Q2B What is the relationship of: [respondent name] [Text sex, age]
to: [respondent name]? [Text sex, age]

Is that a(n):
1 ... birth son/daughter?
2 ... step son/daughter?
3 ... adopted son/daughter?

RNC_Q2C What is the relationship of: [respondent name] [Text sex, age]
to: [respondent name]? [Text sex, age]

Is that a(n):
1 ... full brother/sister?
2 ... half brother/sister?
3 ... step brother/sister?
4 ... adopted brother/sister?
5 ... foster brother/sister?

RNC_Q2D What is the relationship of: [respondent name] [Text sex, age]
to: [respondent name]? [Text sex, age]

Is that a(n):
1 ... father/mother-in-law?
2 ... son/daughter-in-law?
3 ... brother/sister-in-law?
4 ... other in-law?

RNC_Q2E What is the relationship of: [respondent name] [Text sex, age]
to: [respondent name]? [Text sex, age]

Is that a(n):
1 ... uncle/aunt?
2 ... cousin?
3 ... nephew/niece?
4 ... other relative?

RNC_Q2F What is the relationship of: [respondent name] [Text sex, age]
to: [respondent name]? [Text sex, age]

Is that a(n):
1 ... boyfriend/girlfriend?
2 ... room-mate?
3 ... other?

RNC_END
**Age of respondent (ANC)**

**ANC_BEG**

**ANC_C01A** If (do ANC block = 1), go to ANC_R01. Otherwise, go to ANC_END.

**ANC_R01** For some of the questions I'll be asking, I need to know ^YOUR2 exact date of birth. INTERVIEWER: Press <Enter> to continue.

**Date Block**

**ANC_Q01** INTERVIEWER: Enter the day.
If necessary, ask (What is the day?)

||
---|---
(MIN: 1) (MAX: 31)
DK, R

**ANC_Q01** INTERVIEWER: Enter the month.
If necessary, ask (What is the month?)

1 January   7 July
2 February  8 August
3 March   9 September
4 April   10 October
5 May   11 November
6 June   12 December
DK, R

**ANC_Q01** INTERVIEWER: Enter a four-digit year.
If necessary, ask (What is the year?)

||| |
---|---|---
DK, R

**ANC_C02A** If ANC_Q01 (Year) = DK, R, go to ANC_Q03.

**ANC_C02B** Calculate age based on the entered date of birth.

**ANC_Q02** So ^YOUR1 age is [calculated age]. Is that correct?

1 Yes (Go to ANC_C03)
2 No, return and correct date of birth (Go to ANC_Q01)
3 No, collect age (Go to ANC_Q03)
(DK, R are not allowed)

**ANC_C03** If [calculated age] < 12 years, go to ANC_R04. Otherwise go to ANC_END.

**ANC_Q03** What is ^YOUR1 age?

||| |
---|---|---
Age in years
(MIN: 0) (MAX: 130)
(DK, R are not allowed)

**ANC_C04** If age < 12 years, go to ANC_R04. Otherwise, go to ANC_END.
Because ^YOU1 ^ARE less than 12 years old, ^YOU1 ^ARE not eligible to participate in the Canadian Community Health Survey.

INTERVIEWER: Press <Enter> to continue.

NOTE: Auto code as 90 Unusual/Special circumstances and call the exit block.
General health (GEN)

GEN_BEG

If (do GEN = 1), go to GEN_R01. Otherwise, go to GEN_END.

GEN_R01

This survey deals with various aspects of \(^{\text{YOUR2}}\) health. I'll be asking about such things as physical activity, social relationships and health status. By health, we mean not only the absence of disease or injury but also physical, mental and social well-being.

INTERVIEWER: Press <Enter> to continue.

GEN_Q01

To start, in general, would you say \(^{\text{YOUR1}}\) health is:

INTERVIEWER: Read categories to respondent.

1  ... excellent?
2  ... very good?
3  ... good?
4  ... fair?
5  ... poor?
DK, R

GEN_Q02

Compared to one year ago, how would you say \(^{\text{YOUR1}}\) health is now? Is it:

INTERVIEWER: Read categories to respondent.

1  ... much better now than 1 year ago?
2  ... somewhat better now (than 1 year ago)?
3  ... about the same as 1 year ago?
4  ... somewhat worse now (than 1 year ago)?
5  ... much worse now (than 1 year ago)?
DK, R

GEN_C02A

If proxy interview, go to GEN_C07. Otherwise, go to GEN_Q02A.

GEN_Q02A

How satisfied are you with your life in general?

INTERVIEWER: Read categories to respondent.

1  Very satisfied
2  Satisfied
3  Neither satisfied nor dissatisfied
4  Dissatisfied
5  Very dissatisfied
DK, R

GEN_Q02B

In general, would you say your mental health is:

INTERVIEWER: Read categories to respondent.

1  ... excellent?
2  ... very good?
3  ... good?
4  ... fair?
5  ... poor?
DK, R

GEN_C07

If age < 15, go to GEN_C08A. Otherwise, go to GEN_Q07.
Thinking about the amount of stress in YOUR life, would you say that most days are:

INTERVIEWER: Read categories to respondent.

1 ... not at all stressful?
2 ... not very stressful?
3 ... a bit stressful?
4 ... quite a bit stressful?
5 ... extremely stressful?
DK, R

If proxy interview, go to GEN_END. Otherwise, go to GEN_C08B.

If age < 15 or age > 75, go to GEN_Q10. Otherwise, go to GEN_Q08.

Have you worked at a job or business at any time in the past 12 months?

1 Yes
2 No (Go to GEN_Q10)
   DK, R (Go to GEN_Q10)

The next question is about your main job or business in the past 12 months. Would you say that most days at work were:

INTERVIEWER: Read categories to respondent.

1 ... not at all stressful?
2 ... not very stressful?
3 ... a bit stressful?
4 ... quite a bit stressful?
5 ... extremely stressful?
DK, R

How would you describe your sense of belonging to your local community?

Would you say it is:

INTERVIEWER: Read categories to respondent.

1 ... very strong?
2 ... somewhat strong?
3 ... somewhat weak?
4 ... very weak?
DK, R

GEN_END
Voluntary organizations - Participation (ORG)

ORG_BEG

ORG_C1A If (do ORG block = 1), go to ORG_C1B. Otherwise, go to ORG_END.

ORG_C1B If proxy interview, go to ORG_END. Otherwise, go to ORG_Q1.

ORG_Q1

Are you a member of any voluntary organizations or associations such as school groups, church social groups, community centres, ethnic associations or social, civic or fraternal clubs?

1 Yes
2 No (Go to ORG_END)
   DK, R (Go to ORG_END)

ORG_Q2

How often did you participate in meetings or activities of these groups in the past 12 months? If you belong to many, just think of the ones in which you are most active.

INTERVIEWER: Read categories to respondent.

1 At least once a week
2 At least once a month
3 At least 3 or 4 times a year
4 At least once a year
5 Not at all
   DK, R

ORG_END
Sleep (SLP)

SLP_BEG

SLP_C1 If (do SLP = 2), go to SLP_END.

SLPFDO Otherwise, go to SLP_C2.

SLP_C2 If proxy interview, go to SLP_END.
Otherwise, go to SLP_Q01.

SLP_Q01

Now a few questions about sleep.

How long do you usually spend sleeping each night?
INTERVIEWER: Do not include time spent resting.

1 Under 2 hours
2 2 hours to less than 3 hours
3 3 hours to less than 4 hours
4 4 hours to less than 5 hours
5 5 hours to less than 6 hours
6 6 hours to less than 7 hours
7 7 hours to less than 8 hours
8 8 hours to less than 9 hours
9 9 hours to less than 10 hours
10 10 hours to less than 11 hours
11 11 hours to less than 12 hours
12 12 hours or more

DK
R (Go to SLP_END)

SLP_Q02

How often do you have trouble going to sleep or staying asleep?
INTERVIEWER: Read categories to respondent.

1 None of the time
2 A little of the time
3 Some of the time
4 Most of the time
5 All of the time

DK, R

SLP_Q03

How often do you find your sleep refreshing?

1 None of the time
2 A little of the time
3 Some of the time
4 Most of the time
5 All of the time

DK, R
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</tr>
<tr>
<td>2</td>
<td>A little of the time</td>
</tr>
<tr>
<td>3</td>
<td>Some of the time</td>
</tr>
<tr>
<td>4</td>
<td>Most of the time</td>
</tr>
<tr>
<td>5</td>
<td>All of the time</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>
Changes made to improve health (CIH)

CIH_BEG

CIH_C1A If (do CIH block = 1), go to CIH_C1B.
CIHFLOPT Otherwise, go to CIH_END.

CIH_C1B If proxy interview, go to CIH_END.
Otherwise, go to CIH_Q1.

CIH_Q1 Next, some questions about changes made to improve health.
CIH_1 In the past 12 months, did you do anything to improve your health? (For example, lost weight, quit smoking, increased exercise)

1  Yes
2  No  (Go to CIH_Q3)
   DK, R  (Go to CIH_END)

CIH_Q2 What is the single most important change you have made?
CIH_2

1  Increased exercise, sports / physical activity
2  Lost weight
3  Changed diet / improved eating habits
4  Quit smoking / reduced amount smoked
5  Drank less alcohol
6  Reduced stress level
7  Received medical treatment
8  Took vitamins
9  Other
   DK, R

CIH_Q3 Do you think there is [anything else/anything] you should do to improve your physical health?
CIH_3

1  Yes
2  No  (Go to CIH_END)
   DK, R  (Go to CIH_END)

Note: If CIH_Q1 = 1, use “anything else” in CIH_Q3. Otherwise, use “anything” in CIH_Q3.

CIH_Q4 What is the most important thing?
CIH_4

1  Start / Increase exercise, sports / physical activity
2  Lose weight
3  Change diet / improve eating habits
4  Quit smoking / reduce amount smoked
5  Drink less alcohol
6  Reduce stress level
7  Receive medical treatment
8  Take vitamins
9  Other
   DK, R
CIH_Q5  Is there anything stopping you from making this improvement?
   CIH_5
   1    Yes
   2    No    (Go to CIH_Q7)
        DK, R  (Go to CIH_Q7)

CIH_Q6  What is that?
   INTERVIEWER: Mark all that apply.
   CIH_6A  1  Lack of will power / self-discipline
   CIH_6I  2  Family responsibilities
   CIH_6B  3  Work schedule
   CIH_6J  4  Addiction to drugs / alcohol
   CIH_6K  5  Physical condition
   CIH_6G  6  Disability / health problem
   CIH_6F  7  Too stressed
   CIH_6E  8  Too costly / financial constraints
   CIH_6L  9  Not available - in area
   CIH_6M 10  Transportation problems
   CIH_6N 11  Weather problems
   CIH_6H 12  Other
          DK, R

CIH_Q7  Is there anything you intend to do to improve your physical health in the next year?
   CIH_7
   1    Yes
   2    No    (Go to CIH_END)
        DK, R  (Go to CIH_END)

CIH_Q8  What is that?
   INTERVIEWER: Mark all that apply.
   CIH_8A  1  Start / Increase exercise, sports / physical activity
   CIH_8B  2  Lose weight
   CIH_8C  3  Change diet / improve eating habits
   CIH_8J  4  Quit smoking / reduce amount smoked
   CIH_8K  5  Drink less alcohol
   CIH_8G  6  Reduce stress level
   CIH_8L  7  Receive medical treatment
   CIH_8H  8  Take vitamins
   CIH_8I  9  Other
          DK, R

CIH_END
Oral health 1 (OH1)

OH1_BEG

OH1_C20A If (do OH1 block = 1), go to OH1_C20B. Otherwise, go to OH1_END.

OH1_C20B If proxy interview, go to OH1_END. Otherwise, go to OH1_R20.

OH1_R20 Next, some questions about the health of your teeth and mouth. INTERVIEWER: Press <Enter> to continue.

OH1_Q20 In general, would you say the health of your teeth and mouth is:

INTERVIEWER: Read categories to respondent.

1 ... excellent?
2 ... very good?
3 ... good?
4 ... fair?
5 ... poor?
DK, R (Go to OH1_END)

OH1_Q21A Now a few questions about your ability to chew different foods, whether you eat them or not. Can you:

... chew firm foods (e.g., meat)?

1 Yes
2 No
DK, R

OH1_Q21B (Can you:) ... bite off and chew a piece of fresh apple?

1 Yes
2 No
DK, R

OH1_C21C If OH1_Q21A =1 or OH1_Q21B = 1, go to OH1_Q22. Otherwise, go to OH1_Q21C.

Note: OH1_Q21C will be filled with “Yes” during head office processing

OH1_Q21C (Can you:) ... chew boiled vegetables?

1 Yes
2 No
DK, R

OH1_Q22 In the past month, how often have you had any pain or discomfort in your teeth or gums?

INTERVIEWER: Read categories to respondent.

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R

OH1_END
Health care system satisfaction (HCS)

HCS_BEG

HCS_C1A If (do HCS block = 1), go to HCS_C1B.
HCSFOPT Otherwise, go to HCS_END.

HCS_C1B If proxy interview or if age < 15, go to HCS_END.
Otherwise, go to HCS_C1C.

HCS_C1C If province = 10, [province] = [Newfoundland and Labrador]
If province = 11, [province] = [Prince Edward Island]
If province = 12, [province] = [Nova Scotia]
If province = 13, [province] = [New Brunswick]
If province = 24, [province] = [Quebec]
If province = 35, [province] = [Ontario]
If province = 46, [province] = [Manitoba]
If province = 47, [province] = [Saskatchewan]
If province = 48, [province] = [Alberta]
If province = 59, [province] = [British Columbia]
If province = 60, [province] = [Yukon]
If province = 61, [province] = [the Northwest Territories]
If province = 62, [province] = [Nunavut]

HCS_Q1 Now, a few questions about health care services in [province].
HCS_1 Overall, how would you rate the availability of health care services in [province]?
Would you say it is:
INTERVIEWER: Read categories to respondent.

1 ... excellent?
2 ... good?
3 ... fair?
4 ... poor?
DK, R (Go to HCS_END)

HCS_Q2 Overall, how would you rate the quality of the health care services that are available in [province]?
INTERVIEWER: Read categories to respondent.

1 Excellent
2 Good
3 Fair
4 Poor
DK, R

HCS_Q3 Overall, how would you rate the availability of health care services in your community?
HCS_3

1 Excellent
2 Good
3 Fair
4 Poor
DK, R

Optional Content selected by health regions in: Ontario, Yukon and Northwest Territories
Overall, how would you rate the quality of the health care services that are available in your community?

1. Excellent
2. Good
3. Fair
4. Poor

DK, R
Height and weight - Self-reported (HWT)

HWT_BEG

HWT_C1 If (do HWT block = 1), go to HWT_C2. Otherwise, go to HWT_END.

HWT_C2 If (proxy interview = No and sex = female and (14 < age < 50)), go to HWT_Q1. Otherwise, go to HWT_Q2.

HWT_Q1 It is important to know when analyzing health whether or not the person is pregnant. Are you pregnant?
1 Yes  (Go to HWT_END)
2 No
DK, R

HWT_Q2 The next questions are about height and weight.

HWT_2 How tall \text{ARE} \text{YOU}2 without shoes on?
0 Less than 1' / 12" (less than 29.2 cm.)
1 1'0" to 1'11" / 12" to 23" (29.2 to 59.6 cm.)
2 2'0" to 2'11" / 24" to 35" (59.7 to 90.1 cm.)
3 3'0" to 3'11" / 36" to 47" (90.2 to 120.6 cm.)
4 4'0" to 4'11" / 48" to 59" (120.7 to 151.0 cm.)
5 5'0" to 5'11" (151.1 to 181.5 cm.)
6 6'0" to 6'11" (181.6 to 212.0 cm.)
7 7'0" and over (212.1 cm. and over)  
DK, R

HWT_E2 The selected height is too short for a [current age] year old respondent. Please return and correct.

Trigger hard edit if (HWT_Q2 < 3).

HWT_N2A INTERVIEWER: Select the exact height.

HWT_2A
0 1'0" / 1" (29.2 to 31.7 cm.)
1 1'1" / 13" (31.8 to 34.2 cm.)
2 1'2" / 14" (34.3 to 36.7 cm.)
3 1'3" / 15" (36.8 to 39.3 cm.)
4 1'4" / 16" (39.4 to 41.8 cm.)
5 1'5" / 17" (41.9 to 44.4 cm.)
6 1'6" / 18" (44.5 to 46.9 cm.)
7 1'7" / 19" (47.0 to 49.4 cm.)
8 1'8" / 20" (49.5 to 52.0 cm.)
9 1'9" / 21" (52.1 to 54.5 cm.)
10 1'10" / 22" (54.6 to 57.1 cm.)
11 1'11" / 23" (57.2 to 59.6 cm.)
DK, R
**HWT_N2B**

**INTERVIEWER:** Select the exact height.

<table>
<thead>
<tr>
<th>Height</th>
<th>Range</th>
<th>Centimeters</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>2'0&quot; / 24&quot;</td>
<td>61.0 to 62.1 cm.</td>
</tr>
<tr>
<td>1</td>
<td>2'1&quot; / 25&quot;</td>
<td>62.2 to 64.7 cm.</td>
</tr>
<tr>
<td>2</td>
<td>2'2&quot; / 26&quot;</td>
<td>64.8 to 67.2 cm.</td>
</tr>
<tr>
<td>3</td>
<td>2'3&quot; / 27&quot;</td>
<td>67.3 to 69.8 cm.</td>
</tr>
<tr>
<td>4</td>
<td>2'4&quot; / 28&quot;</td>
<td>69.9 to 72.3 cm.</td>
</tr>
<tr>
<td>5</td>
<td>2'5&quot; / 29&quot;</td>
<td>72.4 to 74.8 cm.</td>
</tr>
<tr>
<td>6</td>
<td>2'6&quot; / 30&quot;</td>
<td>74.9 to 77.4 cm.</td>
</tr>
<tr>
<td>7</td>
<td>2'7&quot; / 31&quot;</td>
<td>77.5 to 79.9 cm.</td>
</tr>
<tr>
<td>8</td>
<td>2'8&quot; / 32&quot;</td>
<td>80.0 to 82.5 cm.</td>
</tr>
<tr>
<td>9</td>
<td>2'9&quot; / 33&quot;</td>
<td>82.6 to 85.0 cm.</td>
</tr>
<tr>
<td>10</td>
<td>2'10&quot; / 34&quot;</td>
<td>85.1 to 87.5 cm.</td>
</tr>
<tr>
<td>11</td>
<td>2'11&quot; / 35&quot;</td>
<td>87.6 to 90.1 cm.</td>
</tr>
</tbody>
</table>

**HWT_N2C**

**INTERVIEWER:** Select the exact height.

<table>
<thead>
<tr>
<th>Height</th>
<th>Range</th>
<th>Centimeters</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>3'0&quot; / 36&quot;</td>
<td>90.2 to 92.6 cm.</td>
</tr>
<tr>
<td>1</td>
<td>3'1&quot; / 37&quot;</td>
<td>92.7 to 95.2 cm.</td>
</tr>
<tr>
<td>2</td>
<td>3'2&quot; / 38&quot;</td>
<td>95.3 to 97.7 cm.</td>
</tr>
<tr>
<td>3</td>
<td>3'3&quot; / 39&quot;</td>
<td>97.8 to 100.2 cm.</td>
</tr>
<tr>
<td>4</td>
<td>3'4&quot; / 40&quot;</td>
<td>100.3 to 102.8 cm.</td>
</tr>
<tr>
<td>5</td>
<td>3'5&quot; / 41&quot;</td>
<td>102.9 to 105.3 cm.</td>
</tr>
<tr>
<td>6</td>
<td>3'6&quot; / 42&quot;</td>
<td>105.4 to 107.9 cm.</td>
</tr>
<tr>
<td>7</td>
<td>3'7&quot; / 43&quot;</td>
<td>108.0 to 110.4 cm.</td>
</tr>
<tr>
<td>8</td>
<td>3'8&quot; / 44&quot;</td>
<td>110.5 to 112.9 cm.</td>
</tr>
<tr>
<td>9</td>
<td>3'9&quot; / 45&quot;</td>
<td>113.0 to 115.5 cm.</td>
</tr>
<tr>
<td>10</td>
<td>3'10&quot; / 46&quot;</td>
<td>115.6 to 118.0 cm.</td>
</tr>
<tr>
<td>11</td>
<td>3'11&quot; / 47&quot;</td>
<td>118.1 to 120.6 cm.</td>
</tr>
</tbody>
</table>

**HWT_N2D**

**INTERVIEWER:** Select the exact height.

<table>
<thead>
<tr>
<th>Height</th>
<th>Range</th>
<th>Centimeters</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>4'0&quot; / 48&quot;</td>
<td>120.7 to 123.1 cm.</td>
</tr>
<tr>
<td>1</td>
<td>4'1&quot; / 49&quot;</td>
<td>123.2 to 125.6 cm.</td>
</tr>
<tr>
<td>2</td>
<td>4'2&quot; / 50&quot;</td>
<td>125.7 to 128.2 cm.</td>
</tr>
<tr>
<td>3</td>
<td>4'3&quot; / 51&quot;</td>
<td>128.3 to 130.7 cm.</td>
</tr>
<tr>
<td>4</td>
<td>4'4&quot; / 52&quot;</td>
<td>130.8 to 133.3 cm.</td>
</tr>
<tr>
<td>5</td>
<td>4'5&quot; / 53&quot;</td>
<td>133.4 to 135.8 cm.</td>
</tr>
<tr>
<td>6</td>
<td>4'6&quot; / 54&quot;</td>
<td>135.9 to 138.3 cm.</td>
</tr>
<tr>
<td>7</td>
<td>4'7&quot; / 55&quot;</td>
<td>138.4 to 140.9 cm.</td>
</tr>
<tr>
<td>8</td>
<td>4'8&quot; / 56&quot;</td>
<td>141.0 to 143.4 cm.</td>
</tr>
<tr>
<td>9</td>
<td>4'9&quot; / 57&quot;</td>
<td>143.5 to 146.0 cm.</td>
</tr>
<tr>
<td>10</td>
<td>4'10&quot; / 58&quot;</td>
<td>146.1 to 148.5 cm.</td>
</tr>
<tr>
<td>11</td>
<td>4'11&quot; / 59&quot;</td>
<td>148.6 to 151.0 cm.</td>
</tr>
</tbody>
</table>

Go to HWT_Q3
**INTERVIEWER:** Select the exact height.

**HWT_2E**

0  5'0" (151.1 to 153.6 cm.)
1  5'1" (153.7 to 156.1 cm.)
2  5'2" (156.2 to 158.7 cm.)
3  5'3" (158.8 to 161.2 cm.)
4  5'4" (161.3 to 163.7 cm.)
5  5'5" (163.8 to 166.3 cm.)
6  5'6" (166.4 to 168.8 cm.)
7  5'7" (168.9 to 171.4 cm.)
8  5'8" (171.5 to 173.9 cm.)
9  5'9" (174.0 to 176.4 cm.)
10 5'10" (176.5 to 179.0 cm.)
11 5'11" (179.1 to 181.5 cm.)
DK, R

Go to HWT_Q3

**HWT_2F**

0  6'0" (181.6 to 184.1 cm.)
1  6'1" (184.2 to 186.6 cm.)
2  6'2" (186.7 to 189.1 cm.)
3  6'3" (189.2 to 191.7 cm.)
4  6'4" (191.8 to 194.2 cm.)
5  6'5" (194.3 to 196.8 cm.)
6  6'6" (196.9 to 199.3 cm.)
7  6'7" (199.4 to 201.8 cm.)
8  6'8" (201.9 to 204.4 cm.)
9  6'9" (204.5 to 206.9 cm.)
10 6'10" (207.0 to 209.5 cm.)
11 6'11" (209.6 to 212.0 cm.)
DK, R

**HWT_Q3**

**INTERVIEWER:** Select the exact height.

**HWT_3**

**INTERVIEWER:** Enter amount only.

<table>
<thead>
<tr>
<th></th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(MIN: 1) (MAX: 575)</td>
</tr>
</tbody>
</table>
DK, R (Go to HWT_END)

**HWT_N4**

**INTERVIEWER:** Was that in pounds or kilograms?

1  Pounds
2  Kilograms
   (DK, R are not allowed)

**HWT_E4**

An unusual value has been entered. Please confirm.

Trigger soft edit if ((HWT_Q3 > 300 and HWT_N4 = 1) or (HWT_Q3 > 136 and HWT_N4 = 2)) or ((HWT_Q3 < 60 and HWT_N4 = 1) or (HWT_Q3 < 27 and HWT_N4 = 2)).

**HWT_C4**

If proxy interview, go to HWT_END.
Otherwise, go to HWT_Q4.
Do you consider yourself:
INTerviewer: Read categories to respondent.

1 ... overweight?
2 ... underweight?
3 ... just about right?
   DK, R

HWT_END
Chronic conditions (CCC)

CCC_BEG

If (do CCC block = 1), go to CCC_R011. Otherwise, go to CCC_END.

CCC_R011  Now I'd like to ask about certain chronic health conditions which ^YOU2 may have. We are interested in "long-term conditions" which are expected to last or have already lasted 6 months or more and that have been diagnosed by a health professional.
INTERVIEWER: Press <Enter> to continue.

CCC_Q031  ^DOVERB_C ^YOU2 have asthma?
CCC_031

1  Yes
2  No   (Go to CCC_Q051)
DK   (Go to CCC_Q051)
R    (Go to CCC_END)

CCC_Q035  ^HAVE_C ^YOU1 had any asthma symptoms or asthma attacks in the past 12 months?
CCC_035

1  Yes
2  No   (Go to CCC_Q036)
DK, R

CCC_Q036  In the past 12 months, ^HAVE ^YOU1 taken any medicine for asthma such as inhalers, nebulizers, pills, liquids or injections?
CCC_036

1  Yes
2  No   (Go to CCC_Q051)
DK, R

CCC_Q051  ^DOVERB_C ^YOU1 have arthritis, excluding fibromyalgia?
CCC_051

1  Yes
2  No   (Go to CCC_Q052)
DK, R

CCC_C052  If CCC_Q051 = Yes, go to CCC_Q061. Otherwise, go to CCC_B052.

CCC_B052  Call "Symptoms of arthritis – Screening question" Sub Block (CC2)

CCC_Q061  ^DOVERB_C ^YOU2 have back problems, excluding fibromyalgia and arthritis?
CCC_061

1  Yes
2  No   (Go to CCC_Q061)
DK, R
Remember, we're interested in conditions diagnosed by a health professional.

^DOVERB_C ^YOU2 have high blood pressure?

1. Yes (Go to CCC_Q073)
2. No
   DK
   R (Go to CCC_Q081)

^HAVE_C ^YOU1 ever been diagnosed with high blood pressure?

1. Yes
2. No (Go to CCC_Q081)
   DK, R (Go to CCC_Q081)

In the past month, ^HAVE ^YOU1 taken any medicine for high blood pressure?

1. Yes
2. No
   DK, R

If sex = female and age > 15 and (CCC_Q071 = 1 or [CCC_Q072 = 1 and CCC_Q073 = 1]), go to CCC_Q073A. Otherwise, go to CCC_Q081.

^WERE_C ^YOU1 pregnant when ^YOU1 ^WERE first diagnosed with high blood pressure?

1. Yes
2. No (Go to CCC_Q081)
   DK, R (Go to CCC_Q081)

Other than during pregnancy, has a health professional ever told ^YOU2 that ^YOU1 ^HAVE high blood pressure?

1. Yes
2. No
   DK, R

Remember, we're interested in conditions diagnosed by a health professional.

^DOVERB_C ^YOU1 have migraine headaches?

1. Yes
2. No
   DK, R

( ^DOVERB_C ^YOU2 have:)
... chronic bronchitis?

1. Yes
2. No
   DK, R

Note: This question was added back during the July-August 2007 collection period.
If age < 30, go to CCC_Q101. Otherwise, go to CCC_Q091E.

(CCC_Q091E)

^DOVERB_C ^YOU1 have:

... emphysema?
1  Yes
2  No
   DK, R

(CCC_Q091F)

^DOVERB_C ^YOU1 have:

... chronic obstructive pulmonary disease (COPD)?
1  Yes
2  No
   DK, R

(Remember, we're interested in conditions diagnosed by a health professional.)

^DOVERB_C ^YOU2 have diabetes?
1  Yes
2  No  (Go to CCC_Q121)
   DK, R  (Go to CCC_Q121)

^WERE ^YOU1 pregnant when ^YOU1 ^WERE first diagnosed with diabetes?
1  Yes
2  No  (Go to CCC_Q10C)
   DK, R  (Go to CCC_Q10C)

Other than during pregnancy, has a health professional ever told ^YOU2 that ^YOU1 ^HAVE diabetes?
1  Yes
2  No  (Go to CCC_Q121)
   DK, R  (Go to CCC_Q121)
**CCC_Q10C**  
When ^YOU1 ^WERE first diagnosed with diabetes, how long was it before ^YOU1 ^WERE started on insulin?

1. Less than 1 month  
2. 1 month to less than 2 months  
3. 2 months to less than 6 months  
4. 6 months to less than 1 year  
5. 1 year or more  
6. Never  
( Go to CCC_Q106 )

**CCC_Q105**  
^DOVERB_C ^YOU2 currently take insulin for ^YOUR1 diabetes?

1. Yes  
2. No  
(DK, R)

(If CCC_Q10C = 6, CCC_Q105 will be filled with "No" during processing)

**CCC_Q106**  
In the past month, did ^YOU2 take pills to control ^YOUR1 blood sugar?

1. Yes  
2. No  
(DK, R)

**CCC_Q121**  
^DOVERB_C ^YOU1 have heart disease?

1. Yes  
2. No  
(DK, R)

**CCC_Q131**  
(^DOVERB_C ^YOU1 have:)  
... cancer?

1. Yes  
( Go to CCC_Q141 )  
2. No  
(DK, R)  
( Go to CCC_Q141 )

**CCC_Q132**  
^HAVE ^YOU1 ever been diagnosed with cancer?

1. Yes  
2. No  
(DK, R)

**CCC_Q141**  
Remember, we're interested in conditions diagnosed by a health professional.

^DOVERB ^YOU1 have intestinal or stomach ulcers?

1. Yes  
2. No  
(DK, R)
^DOVERB ^YOU2 suffer from the effects of a stroke?

1  Yes
2  No
DK, R

(^DOVERB ^YOU2 suffer:) ...

... from urinary incontinence?

1  Yes
2  No
DK, R

^DOVERB_C ^YOU1 suffer from a bowel disorder such as Crohn's Disease, ulcerative colitis, Irritable Bowel Syndrome or bowel incontinence?

1  Yes
2  No  (Go to CCC_C181)
DK, R  (Go to CCC_C181)

What kind of bowel disease ^DOVERB ^YOU1 have?

1  Crohn's Disease
2  Ulcerative colitis
3  Irritable Bowel Syndrome
4  Bowel incontinence
5  Other
DK, R

If age < 18, go to CCC_Q280. Otherwise, go to CCC_Q181.

^DOVERB_C ^YOU2 have: ... Alzheimer's Disease or any other dementia?

1  Yes
2  No
DK, R

Remember, we're interested in conditions diagnosed by a health professional.

^DOVERB_C ^YOU2 have a mood disorder such as depression, bipolar disorder, mania or dysthymia?

INTERVIEWER: Include manic depression.

1  Yes
2  No
DK, R
Canadian Community Health Survey, 2008 Questionnaire, 37

**Canadian Community Health Survey, 2008 Questionnaire, Question 290**

^DOVERB_C^YOU2 have an anxiety disorder such as a phobia, obsessive-compulsive disorder or a panic disorder?

1  Yes
2  No
DK, R

**Symptoms of arthritis – Screening question Sub Block (CC2)**

**CC2_Q01**

During the past 12 months, ^HAVE^YOU1 had pain or stiffness in ^YOUR1 joints, not including ^YOUR1 back and neck?

1  Yes
2  No (Go to CC2_END)
DK, R (Go to CC2_END)

**CC2_Q02**

Would you say ^YOU1 had this pain or stiffness on most days for at least one month?

1  Yes
2  No
DK, R

**CC2_END**
Diabetes care (DIA)

DIA_BEG

DIA_C01A If (do DIA block = 1), go to DIA_C01B.
DIAFOPT Otherwise, go to DIA_END.

DIA_C01B If (CCC_Q101 = 1), go to DIA_C01C.
Otherwise, go to DIA_END.

DIA_C01C If (CCC_Q10A = 1), go to DIA_END.
Otherwise, go to DIA_R01.

DIA_R01 It was reported earlier that ^YOU2 ^HAVE diabetes. The following questions are about diabetes care.
INTERVIEWER: Press <Enter> to continue.

DIA_Q01 In the past 12 months, has a health care professional tested ^YOU2 for haemoglobin “A-one-C”? (An “A-one-C” haemoglobin test measures the average level of blood sugar over a 3-month period.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>(Go to DIA_Q03)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>No</td>
<td>(Go to DIA_Q03)</td>
</tr>
<tr>
<td></td>
<td>DK</td>
<td>(Go to DIA_Q03)</td>
</tr>
<tr>
<td></td>
<td>R</td>
<td>(Go to DIA_END)</td>
</tr>
</tbody>
</table>

DIA_Q02 How many times? (In the past 12 months, has a health care professional tested ^YOU2 for haemoglobin “A-one-C”?)

<table>
<thead>
<tr>
<th></th>
<th>Times</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(MIN: 1) (MAX: 99)</td>
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<td>DK, R</td>
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</tbody>
</table>

DIA_Q03 In the past 12 months, has a health care professional checked ^YOUR1 feet for any sores or irritations?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>(Go to DIA_Q05)</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>No</td>
<td>(Go to DIA_Q05)</td>
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<tr>
<td></td>
<td>No feet</td>
<td>(Go to DIA_Q05)</td>
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<tr>
<td></td>
<td>DK, R</td>
<td>(Go to DIA_Q05)</td>
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</tbody>
</table>

DIA_Q04 How many times? (In the past 12 months, has a health care professional checked ^YOUR1 feet for any sores or irritations?)

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<th>Times</th>
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<td>(MIN: 1) (MAX: 99)</td>
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<td>DK, R</td>
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</tbody>
</table>

DIA_Q05 In the past 12 months, has a health care professional tested ^YOUR1 urine for protein (i.e., Microalbumin)?

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<tr>
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<th>Yes</th>
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<tr>
<td>1</td>
<td>No</td>
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<tr>
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<td>DK, R</td>
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</tbody>
</table>

Optional Content selected by health regions in: Newfoundland and Labrador, Prince Edward Island, Nova Scotia, New Brunswick, Ontario, British Columbia, Yukon and Northwest Territories
^HAVE_C ^YOU2 ever had an eye exam where the pupils of ^YOUR1 eyes were dilated? (This procedure would have made ^HIMHER temporarily sensitive to light.)

1  Yes
2  No  (Go to DIA_R08)
   DK, R  (Go to DIA_R08)

^HAVE_C ^YOU2 ever had an eye exam where the pupils of ^YOUR1 eyes were dilated?

DIA_Q06
DIA_06

When was the last time?

DIA_Q07
DIA_07

INTERVIEWER: Read categories to respondent.

1  Less than one month ago
2  1 month to less than 1 year ago
3  1 year to less than 2 years ago
4  2 or more years ago
   DK, R

Now some questions about diabetes care not provided by a health care professional.

INTERVIEWER: Press <Enter> to continue.

How often ^DOVERB ^YOU2 usually have ^YOUR1 blood checked for glucose or sugar by ^YOURSELF or by a family member or friend?

INTERVIEWER: Select the reporting period here and enter the number in the next screen.

INTERVIEWER: Enter number of times per day.

INTERVIEWER: Enter number of times per week.

INTERVIEWER: Enter number of times per month.
DIA_Q09 How often ^DOVERB ^YOU2 usually have ^YOUR1 feet checked for any sores or irritations by ^YOURSELF or by a family member or friend?

INTERVIEWER: Select the reporting period here and enter the number in the next screen.

1 Per day
2 Per week (Go to DIA_N09C)
3 Per month (Go to DIA_N09D)
4 Per year (Go to DIA_N09E)
5 Never (Go to DIA_C10)
DK, R (Go to DIA_C10)

DIA_R10 Now a few questions about medication.
INTERVIEWER: Press <Enter> to continue
In the past month, did ^YOU2 take aspirin or other ASA (acetylsalicylic acid) medication every day or every second day?

1  Yes
2  No
   DK, R

In the past month, did ^YOU1 take prescription medications such as Lipitor or Zocor to control ^YOUR1 blood cholesterol levels?

1  Yes
2  No
   DK, R
Health utility index (HUI)

HUI_BEG

HUI_N01 The Health Utility Index (HUI) is formed of 8 attributes. In CCHS, these attributes are found in two different modules. The module Pain and discomfort (HUP) is comprised of 3 questions related to the pain and discomfort attribute and is part of the core content which is asked to all survey respondents. The 7 other attributes are found in the module Health Utility Index (HUI) which is offered as optional content to health regions.

HUI_C1 If (do HUI block =2), go to HUI_END.
HUIFDO Otherwise, go to HUI_R1.

HUI_R1 The next set of questions asks about [your/FNAME FNAME’s] day-to-day health. The questions are not about illnesses like colds that affect people for short periods of time. They are concerned with a person’s usual abilities.

You may feel that some of these questions do not apply to [you/FNAME], but it is important that we ask the same questions of everyone.

INTERVIEWER: Press <Enter> to continue.

Vision

HUI_Q01 [Are/Is] [you/he/she] usually able to see well enough to read ordinary newsprint without glasses or contact lenses?

HUI_01

1 Yes (Go to HUI_Q04)
2 No
   DK, R (Go to HUI_END)

HUI_Q02 [Are/Is] [you/he/she] usually able to see well enough to read ordinary newsprint with glasses or contact lenses?

HUI_02

1 Yes (Go to HUI_Q04)
2 No
   DK, R

HUI_Q03 [Are/Is] [you/he/she] able to see at all?

HUI_03

1 Yes (Go to HUI_Q06)
2 No
   DK, R (Go to HUI_Q06)

HUI_Q04 [Are/Is] [you/he/she] able to see well enough to recognize a friend on the other side of the street without glasses or contact lenses?

HUI_04

1 Yes (Go to HUI_Q06)
2 No
   DK, R (Go to HUI_Q06)

HUI_Q05 [Are/Is] [you/he/she] usually able to see well enough to recognize a friend on the other side of the street with glasses or contact lenses?

HUI_05

1 Yes
2 No
   DK, R
Hearing

HUI Q06
HUI_06
[Are/is] [you/FNAME] usually able to hear what is said in a group conversation with at least 3 other people without a hearing aid?

1  Yes  (Go to HUI_Q10)
2  No  (Go to HUI_Q10)

HUI Q07
HUI_07
[Are/is] [you/he/she] usually able to hear what is said in a group conversation with at least 3 other people with a hearing aid?

1  Yes  (Go to HUI_Q08)
2  No  DK, R  (Go to HUI_Q10)

HUI Q07A
HUI_07A
[Are/is] [you/he/she] able to hear at all?

1  Yes  (Go to HUI_Q10)
2  No  DK, R  (Go to HUI_Q10)

HUI Q08
HUI_08
[Are/is] [you/he/she] usually able to hear what is said in a conversation with one other person in a quiet room without a hearing aid?

1  Yes  (Go to HUI_Q10)
2  No  DK, R  (Go to HUI_Q10)

HUI Q09
HUI_09
[Are/is] [you/he/she] usually able to hear what is said in a conversation with one other person in a quiet room with a hearing aid?

1  Yes  (Go to HUI_Q10)
2  No  DK, R

Speech

HUI Q10
HUI_10
[Are/is] [you/FNAME] usually able to be understood completely when speaking with strangers in [your/his/her] own language?

1  Yes  (Go to HUI_Q14)
2  No  DK, R  (Go to HUI_Q14)

HUI Q11
HUI_11
[Are/is] [you/he/she] able to be understood partially when speaking with strangers?

1  Yes
2  No  DK, R
HUI_Q12  [Are/Is] [you/he/she] able to be understood completely when speaking with those who know [you/him/her] well?

1  Yes  (Go to HUI_Q14)
2  No
   DK
   R  (Go to HUI_Q14)

HUI_Q13  [Are/Is] [you/he/she] able to be understood partially when speaking with those who know [you/him/her] well?

1  Yes
2  No
   DK, R

Getting Around

HUI_Q14  [Are/Is] [you/FNAME] usually able to walk around the neighbourhood without difficulty and without mechanical support such as braces, a cane or crutches?

1  Yes  (Go to HUI_Q21)
2  No
   DK, R  (Go to HUI_Q21)

HUI_Q15  [Are/Is] [you/he/she] able to walk at all?

1  Yes
2  No  (Go to HUI_Q18)
   DK, R  (Go to HUI_Q18)

HUI_Q16  [Do/Does] [you/he/she] require mechanical support such as braces, a cane or crutches to be able to walk around the neighbourhood?

1  Yes
2  No
   DK, R

HUI_Q17  [Do/Does] [you/he/she] require the help of another person to be able to walk?

1  Yes
2  No
   DK, R

HUI_Q18  [Do/Does] [you/he/she] require a wheelchair to get around?

1  Yes
2  No  (Go to HUI_Q21)
   DK, R  (Go to HUI_Q21)

HUI_Q19  How often [do/does] [you/he/she] use a wheelchair?

INTERVIEWER: Read categories to respondent.

1  Always
2  Often
3  Sometimes
4  Never
   DK R
HUI_Q20
[Do/Does] [you/he/she] need the help of another person to get around in the wheelchair?

1  Yes
2  No
DK, R

Hands and Fingers

HUI_Q21
[Are/Is] [you/FNAME] usually able to grasp and handle small objects such as a pencil or scissors?

1  Yes (Go to HUI_Q25)
2  No (Go to HUI_Q25)
DK, R

HUI_Q22
[Do/Does] [you/he/she] require the help of another person because of limitations in the use of hands or fingers?

1  Yes (Go to HUI_Q24)
2  No (Go to HUI_Q24)
DK, R

HUI_Q23
[Do/Does] [you/he/she] require the help of another person with: INTERVIEWER: Read categories to respondent.

1  ... some tasks?
2  ... most tasks?
3  ... almost all tasks?
4  ... all tasks?
   DK, R

HUI_Q24
[Do/Does] [you/he/she] require special equipment, for example, devices to assist in dressing, because of limitations in the use of hands or fingers?

1  Yes
2  No
DK, R

Feelings

HUI_Q25
Would you describe [yourself/FNAME] as being usually: INTERVIEWER: Read categories to respondent.

1  ... happy and interested in life?
2  ... somewhat happy?
3  ... somewhat unhappy?
4  ... unhappy with little interest in life?
5  ... so unhappy that life is not worthwhile?
   DK, R

Canadian Community Health Survey, 2008 Questionnaire, 45
Memory

HUI_Q26
HUI_26

How would you describe [your/his/her] usual ability to remember things?
INTERVIEWER: Read categories to respondent.

1   Able to remember most things
2   Somewhat forgetful
3   Very forgetful
4   Unable to remember anything at all
    DK, R

Thinking

HUI_Q27
HUI_27

How would you describe [your/his/her] usual ability to think and solve day-
to-day problems?
INTERVIEWER: Read categories to respondent.

1   Able to think clearly and solve problems
2   Having a little difficulty
3   Having some difficulty
4   Having a great deal of difficulty
5   Unable to think or solve problems
    DK, R

HUI_END
Pain and discomfort (HUP)

HUP_BEG

HUP_C1 If (do HUP block = 1), go to HUP_C2. Otherwise, go to HUP_END.

HUP_C2 If (do HUI block = 1), go to HUP_Q28. Otherwise, go to HUP_R1.

HUP_R1 The next set of questions asks about the level of pain or discomfort you usually experience. They are not about illnesses like colds that affect people for short periods of time.
INTERVIEWER: Press <Enter> to continue.

HUP_Q28 ^ARE_C ^YOU2 usually free of pain or discomfort?
HUP_01
1 Yes (Go to HUP_END)
2 No DK, R (Go to HUP_END)

HUP_Q29 How would you describe the usual intensity of ^YOUR1 pain or discomfort?
HUP_02 INTERVIEWER: Read categories to respondent.
1 Mild
2 Moderate
3 Severe
DK, R

HUP_Q30 How many activities does ^YOUR1 pain or discomfort prevent?
HUP_03 INTERVIEWER: Read categories to respondent.
1 None
2 A few
3 Some
4 Most
DK, R

HUP_END
Health care utilization (HCU)

HCU_BEG

HCU_C01 If (do HCU block = 1), go to HCU_R01. Otherwise, go to HCU_END.

HCU_R01 Now I'd like to ask about ^YOUR2 contacts with various health professionals during the past 12 months, that is, from [date one year ago] to yesterday.
INTERVIEWER: Press <Enter> to continue.

HCU_Q01AA ^DOVERB_C ^YOU2 have a regular medical doctor?

HCU_1AA

1 Yes (Go to HCU_Q01AC)
2 No
   DK, R (Go to HCU_Q01BA)

HCU_Q01AB Why ^DOVERB ^YOU2 not have a regular medical doctor?
INTERVIEWER: Mark all that apply.

HCU_1BA

1 No medical doctors available in the area
2 Medical doctors in the area are not taking new patients
3 Have not tried to contact one
4 Had a medical doctor who left or retired
5 Other - Specify
   DK, R

HCU_C01ABS If HCU_Q01AB <> 5, go to HCU_Q01A1. Otherwise, go to HCU_Q01ABS.

HCU_Q01ABS INTERVIEWER: Specify.

__________________________________________________________
(80 spaces)
DK,R

HCU_Q01A1 Is there a place that ^YOU2 usually [go/goes] to when ^YOU1 [are/is] sick or [need/needs] advice about ^YOUR1 health?

HCU_1A1

1 Yes
2 No
   (Go to HCU_Q01BA)
   DK, R
   (Go to HCU_Q01BA)

Note: If proxy interview the use "goes", "is" and "needs". Otherwise, use "go", "are" and "need".
HCU_Q01A2  **What kind of place is it?**

INTERVIEWER: If the respondent indicates more than one usual place, then ask: What kind of place do you go to most often?

1. Doctor’s office
2. Community health centre / CLSC
3. Walk-in clinic
4. Appointment clinic
5. Telephone health line (e.g., HealthLinks, Telehealth Ontario, Health-Line, TeleCare, Info-Santé)
6. Hospital emergency room
7. Hospital outpatient clinic
8. Other – Specify

DK, R

HCU_C01A2S  If HCU_Q01A2 <> 8, go to HCU_Q01BA. Otherwise, go to HCU_Q01A2S.

HCU_Q01A2S  INTERVIEWER: Specify.

_________________________________________________
(80 spaces)
DK, R

Go to HCU_Q01BA

HCU_Q01AC  **DOVERB_C **YOU2 and this doctor usually speak in English, in French, or in another language?

1. English
2. French
3. Arabic
4. Chinese
5. Cree
6. German
7. Greek
8. Hungarian
9. Italian
10. Korean
11. Persian (Farsi)
12. Polish
13. Portuguese
14. Punjabi
15. Spanish
16. Tagalog (Filipino)
17. Ukrainian
18. Vietnamese
19. Dutch
20. Hindi
21. Russian
22. Tamil
23. Other - Specify

DK, R

HCU_C01ACS  If HCU_Q01AC <> 23, go to HCU_Q01BA. Otherwise, go to HCU_Q01ACS.

HCU_Q01ACS  INTERVIEWER: Specify.

________________________
(80 spaces)
DK, R

HCU_Q01BA  In the past 12 months, **HAVE **YOU2 been a patient overnight in a hospital, nursing home or convalescent home?

1. Yes
2. No (Go to HCU_Q02A)

DK (Go to HCU_Q02A)
R (Go to HCU_END)
For how many nights in the past 12 months?

|   |   |   | Nights
(MIN: 1) (MAX: 366; warning after 100)
DK, R

Note: In processing, if a respondent answered HCU_Q01BA = 2, the variable HCU_Q01BB is given the value of "0".

[Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to any of the following health professionals about ^YOUR1 physical, emotional or mental health:

... a family doctor[, pediatrician] or general practitioner?
(include pediatrician if age < 18)
INTERVIEWER: Include both face to face and telephone contacts.

1  Yes
2  No  (Go to HCU_Q02B)
DK, R  (Go to HCU_Q02B)

Note: If HCU_Q01BA = 1, use "Not counting when ^YOU2 ^W ERE an overnight patient, in the past 12 months". Otherwise, use "In the past 12 months".

How many times (in the past 12 months)?

|   |   |   | Times
(MIN: 1) (MAX: 366; warning after 12)
DK, R

Note: In processing, if a respondent answered HCU_Q02A = 2, the variable HCU_Q02A1 is given the value of "0".

Where did the most recent contact take place?
INTERVIEWER: If respondent says "hospital", probe for details.

1  Doctor's office
2  Hospital emergency room
3  Hospital outpatient clinic (e.g. day surgery, cancer)
4  Walk-in clinic
5  Appointment clinic
6  Community health centre / CLSC
7  At work
8  At school
9  At home
10  Telephone consultation only
11  Other - Specify
DK, R

If HCU_Q02A2 = 11, go to HCU_Q02A2S. Otherwise, go to HCU_Q02B.

INTERVIEWER: Specify.
HCU_Q02B

(Not counting when YOU were an overnight patient, in the past 12 months/In the past 12 months), HAVE YOU seen, or talked to:

… an eye specialist, such as an ophthalmologist or optometrist (about YOUR physical, emotional or mental health)?

INTERVIEWER: Include both face to face and telephone contacts.

1 Yes
2 No (Go to HCU_Q02C)
DK, R (Go to HCU_Q02C)

Note: If HCU_Q01BA = 1, use “Not counting when YOU were an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

HCU_Q02B1

How many times (in the past 12 months)?

| | | | Times
(MIN: 1) (MAX: 75; warning after 3)
DK, R

Note: In processing, if a respondent answered HCU_Q02B = 2, the variable HCU_Q02B1 is given the value of “0”.

HCU_Q02C

(Not counting when YOU were an overnight patient, in the past 12 months/In the past 12 months), HAVE YOU seen, or talked to:

… any other medical doctor or specialist such as a surgeon, allergist, orthopaedist, [gynaecologist/urologist] or psychiatrist (about YOUR physical, emotional or mental health)?

INTERVIEWER: Include both face to face and telephone contacts.

1 Yes
2 No (Go to HCU_Q02D)
DK, R (Go to HCU_Q02D)

Note: If respondent is male, use urologist. Otherwise, use gynaecologist.
If HCU_Q01BA = 1, use “Not counting when YOU were an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

HCU_Q02C1

How many times (in the past 12 months)?

| | | | Times
(MIN: 1) (MAX: 300; warning after 7)
DK, R

Note: In processing, if a respondent answered HCU_Q02C = 2, the variable HCU_Q02C1 is given the value of “0”.
**HCU Q02C2**

**Where did the most recent contact take place?**

**INTERVIEWER:** If respondent says "hospital", probe for details.

1. Doctor's office
2. Hospital emergency room
3. Hospital outpatient clinic (e.g. day surgery, cancer)
4. Walk-in clinic
5. Appointment clinic
6. Community health centre / CLSC
7. At work
8. At school
9. At home
10. Telephone consultation only
11. Other - Specify

**HCU C02C2S**

If HCU Q02C2 = 11, go to HCU Q02C2S. Otherwise, go to HCU Q02D.

**HCU Q02C2S**

**INTERVIEWER:** Specify.

_________________________________________________
(80 spaces)

DK, R

**HCU Q02D**

[Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:

... a nurse for care or advice about ^YOUR1 physical, emotional or mental health?

**INTERVIEWER:** Include both face to face and telephone contacts.

1. Yes
2. No  (Go to HCU Q02E)

**Note:**

If HCU Q01BA = 1, use "Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months". Otherwise, use "In the past 12 months".

**HCU Q02D1**

**How many times (in the past 12 months)?**

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(MIN: 1)  (MAX: 366; warning after 15)

DK, R

**Note:**

In processing, if a respondent answered HCU Q02D = 2, the variable HCU Q02D1 is given the value of "0".
HCU_Q02D2 Where did the most recent contact take place?
INTERVIEWER: If respondent says "hospital", probe for details.

1 Doctor’s office
2 Hospital emergency room
3 Hospital outpatient clinic (e.g. day surgery, cancer)
4 Walk-in clinic
5 Appointment clinic
6 Community health centre / CLSC
7 At work
8 At school
9 At home
10 Telephone consultation only
11 Other - Specify

DK, R

HCU_C02D2S If HCU_Q02D2 = 11, go to HCU_Q02D2S.
Otherwise, go to HCU_Q02E.

HCU_Q02D2S INTERVIEWER: Specify.

(80 spaces)
DK, R

HCU_Q02E ([Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:)

... a dentist, dental hygienist or orthodontist (about ^YOUR1 physical, emotional or mental health)?
INTERVIEWER: Include both face to face and telephone contacts.

1 Yes
2 No  (Go to HCU_Q02F)
      DK, R  (Go to HCU_Q02F)

Note: If HCU_Q01BA = 1, use "Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months”. Otherwise, use "In the past 12 months”.

HCU_Q02E1 How many times (in the past 12 months)?

|   |   |   |   | Times
(MIN: 1)  (MAX: 99; warning after 4)
DK, R

Note: In processing, if a respondent answered HCU_Q02E = 2, the variable HCU_Q02E1 is given the value of “0”.

HCU_Q02F ([Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:)

... a chiropractor (about ^YOUR1 physical, emotional or mental health)?
INTERVIEWER: Include both face to face and telephone contacts.

1 Yes
2 No  (Go to HCU_Q02G)
      DK, R  (Go to HCU_Q02G)

Note: If HCU_Q01BA = 1, use “Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

Canadian Community Health Survey, 2008 Questionnaire, 53
**HCU_Q02F1**  
**How many times (in the past 12 months)?**

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<td>DK, R</td>
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Note: In processing, if a respondent answered HCU_Q02F = 2, the variable HCU_Q02F1 is given the value of “0”.

**HCU_Q02G**  
**[Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:**

… a physiotherapist about ^YOUR1 physical, emotional or mental health?  
**INTERVIEWER:** Include both face to face and telephone contacts.

1  Yes  
2  No  (Go to HCU_Q02GA)  
DK, R  (Go to HCU_Q02GA)

Note: If HCU_Q01BA = 1, use “Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

**HCU_Q02G1**  
**How many times (in the past 12 months)?**

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<td>DK, R</td>
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Note: In processing, if a respondent answered HCU_Q02G = 2, the variable HCU_Q02G1 is given the value of “0”.

**HCU_Q02GA**  
**[Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:**

… a psychologist (about ^YOUR1 physical, emotional or mental health)?  
**INTERVIEWER:** Include both face to face and telephone contacts.

1  Yes  
2  No  (Go to HCU_Q02GB)  
DK, R  (Go to HCU_Q02GB)

Note: If HCU_Q01BA = 1, use “Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

**HCU_Q02GA1**  
**How many times (in the past 12 months)?**

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</table>

Note: In processing, if a respondent answered HCU_Q02GA = 2, the variable HCU_Q02GA1 is given the value of “0”.

---

*Canadian Community Health Survey, 2008 Questionnaire, 54*
HCU_Q02GB  ([Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:)

… a social worker or counsellor (about ^YOUR1 physical, emotional or mental health)?

INTERVIEWER: Include both face to face and telephone contacts.

1  Yes
2  No  (Go to HCU_Q02J)
DK, R  (Go to HCU_Q02J)

Note: If HCU_Q01BA = 1, use “Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

HCU_Q02GB1  How many times (in the past 12 months)?

| | | | Times
(MIN: 1)  (MAX: 366; warning after 20)
DK, R

Note: In processing, if a respondent answered HCU_Q02GB = 2, the variable HCU_Q02GB1 is given the value of “0”.

HCU_Q02J  ([Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months/In the past 12 months], ^HAVE ^YOU2 seen, or talked to:

… a speech, audiology or occupational therapist about ^YOUR1 physical, emotional or mental health?

INTERVIEWER: Include both face to face and telephone contacts.

1  Yes
2  No  (Go to HCU_END)
DK, R  (Go to HCU_END)

Note: If HCU_Q01BA = 1, use “Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months”. Otherwise, use “In the past 12 months”.

HCU_Q02J1  How many times (in the past 12 months)?

| | | | Times
(MIN: 1)  (MAX: 200; warning after 12)
DK, R

Note: In processing, if a respondent answered HCU_Q02J = 2, the variable HCU_Q02J1 is given the value of “0”.

HCU_END
Home care services (HMC)

HMC_BEG

HMC_C09A If (do HMC block = 1), go to HMC_C09B. Otherwise, go to HMC_END.

HMC_C09B If age < 18, go to HMC_END. Otherwise, go to HMC_R09.

HMC_R09 Now some questions on home care services. These are health care, home maker or other support services received at home. People may receive home care due to a health problem or condition that affects their daily activities. Examples include: nursing care, personal care or help with bathing, housework, meal preparation, meal delivery and respite care.

INTERVIEWER: Press <Enter> to continue.

HMC_Q09 \^HAVE_C ^YOU2 received any home care services in the past 12 months, with the cost being entirely or partially covered by government?

1 Yes
2 No (Go to HMC_Q11)
DK (Go to HMC_Q11)
R (Go to HMC_END)

HMC_Q10 What type of services \^HAVE ^YOU1 received?

INTERVIEWER: Read categories to respondent. Mark all that apply.

Cost must be entirely or partially covered by government.

HMC_10A 1 Nursing care (e.g., dressing changes, preparing medications, V.O.N. visits)
HMC_10B 2 Other health care services (e.g., physiotherapy, occupational or speech therapy, nutrition counselling)
HMC_10I 3 Medical equipment or supplies
HMC_10C 4 Personal care (e.g., bathing, foot care)
HMC_10D 5 Housework (e.g., cleaning, laundry)
HMC_10E 6 Meal preparation or delivery
HMC_10F 7 Shopping
HMC_10G 8 Respite care (i.e., caregiver relief)
HMC_10H 9 Other - Specify
DK, R

HMC_C10S If HMC_Q10 = 9, go to HMC_Q10S. Otherwise, go to HMC_Q11.

HMC_Q10S INTERVIEWER: Specify.

______________________________
(80 spaces)
DK, R
HMC_Q11  ^HAVE ^YOU2 received any [other] home care services in the past 12 months, with the cost not covered by government (for example: care provided by a private agency or by a spouse or friends)?
INTERVIEWER: Include only health care, homemaker or other support services (e.g., housework) that are provided because of a respondent’s health problem or condition.

1  Yes
2  No  (Go to HMC_Q14)
    DK, R  (Go to HMC_Q14)

Note:  If HMC_Q09 = 1, use “any other home care services” in HMC_Q11. Otherwise, use “any home care services” in HMC_Q11.

HMC_Q12  Who provided these [other] home care services?
INTERVIEWER: Read categories to respondent. Mark all that apply.

HMC_12A  1  Nurse from a private agency
HMC_12B  2  Homemaker or other support services from a private agency
HMC_12C  3  Physiotherapist or other therapist from a private agency
HMC_12D  4  Neighbour or friend
HMC_12E  5  Family member or spouse
HMC_12F  6  Volunteer
HMC_12G  7  Other - Specify
        DK, R

HMC_C12S If HMC_Q12 = 7, go to HMC_Q12S. Otherwise, go to HMC_C13.

HMC_Q12S  INTERVIEWER: Specify.

_______________________
(80 spaces)
    DK, R

Note:  If HMC_Q09 = 1, use “any other home care services” in HMC_Q12. Otherwise, use “any home care services” in HMC_Q12.

HMC_C13  For each person identified in HMC_Q12, ask HMC_Q13n up to 7 times, n = where A, B, C, D, E, F, G.

HMC_Q13n  What type of services ^HAVE ^YOU1 received from [person identified in HMC_Q12]?
INTERVIEWER: Read categories to respondent. Mark all that apply.

HMC_3nA  1  Nursing care (e.g., dressing changes, preparing medications, V.O.N. visits)
HMC_3nB  2  Other health care services (e.g., physiotherapy, occupational or speech therapy, nutrition counselling)
HMC_3nI  3  Medical equipment or supplies
HMC_3nC  4  Personal care (e.g., bathing, foot care)
HMC_3nD  5  Housework (e.g., cleaning, laundry)
HMC_3nE  6  Meal preparation or delivery
HMC_3nF  7  Shopping
HMC_3nG  8  Respite care (i.e., caregiver relief)
HMC_3nH  9  Other - Specify
        DK, R

HMC_C13nS If HMC_Q13n = 9, go to HMC_Q13nS. Otherwise, go to HMC_Q14.
HMC_Q13nS INTERVIEWER: Specify.

(80 spaces)
DK, R

HMC_Q14 During the past 12 months, was there ever a time when ^YOU2 felt that ^YOU1 needed home care services but ^YOU1 didn't receive them?

1  Yes
2  No  (Go to HMC_END)
DK, R  (Go to HMC_END)

HMC_Q15 Thinking of the most recent time, why didn't ^YOU1 get these services?
INTERVIEWER: Mark all that apply.

HMC_15A  1  Not available - in the area
HMC_15B  2  Not available - at time required (e.g., inconvenient hours)
HMC_15C  3  Waiting time too long
HMC_15D  4  Felt would be inadequate
HMC_15E  5  Cost
HMC_15F  6  Too busy
HMC_15G  7  Didn't get around to it / didn't bother
HMC_15H  8  Didn't know where to go / call
HMC_15I  9  Language problems
HMC_15J 10  Personal or family responsibilities
HMC_15K 11  Decided not to seek services
HMC_15L 12  Doctor - did not think it was necessary
HMC_15M 13  Did not qualify / not eligible for homecare
HMC_15N 14  Still waiting for homecare
HMC_15O 15  Other - Specify
DK, R

HMC_C15S If HMC_Q15 = 15, go to HMC_Q15S.
Otherwise, go to HMC_Q16.

HMC_Q15S INTERVIEWER: Specify.

(80 spaces)
DK, R

HMC_Q16 Again, thinking of the most recent time, what type of home care was needed?
INTERVIEWER: Mark all that apply.

HMC_16A  1  Nursing care (e.g., dressing changes, preparing medications, V.O.N. visits)
HMC_16B  2  Other health care services (e.g., physiotherapy, occupational or speech therapy, nutrition counselling)
HMC_16C  3  Medical equipment or supplies
HMC_16D  4  Personal care (e.g., bathing, foot care)
HMC_16E  5  Housework (e.g., cleaning, laundry)
HMC_16F  6  Meal preparation or delivery
HMC_16G  7  Shopping
HMC_16H  8  Respite care (i.e., caregiver relief)
HMC_16I  9  Other - Specify
DK, R

HMC_C16S If HMC_Q16 = 9, go to HMC_Q16S.
Otherwise, go to HMC_Q17.
HMC_Q16S INTERVIEWER: Specify.

_______________________
(80 spaces)
DK, R

HMC_Q17 Where did YOU try to get this home care service? INTERVIEWER: Mark all that apply.

HMC_17A 1 A government sponsored program
HMC_17B 2 A private agency
HMC_17C 3 A family member, friend or neighbour
HMC_17D 4 A volunteer organization
HMC_17E 5 Other
DK, R

HMC_END
Patient satisfaction – Health care services (PAS)

PAS_BEG

Note: This module was only collected as part of the subsample.

PAS_C11A If (do PAS block = 1), go to PAS_C11B. Otherwise, go to PAS_END.

PAS_C11B If proxy interview or if age < 15, go to PAS_END. Otherwise, go to PAS_R1.

PAS_R1 Earlier, I asked about your use of health care services in the past 12 months. Now I’d like to get your opinion on the quality of the care you received.
INTERVIEWER: Press <Enter> to continue.

PAS_C11D If HCU_Q01BA = 1 or at least one of HCU_Q02A to HCU_Q02J = 1, go to PAS_Q12. Otherwise, go to PAS_Q11.

Note: In processing, if a respondent answered HCU_Q01BA = 1 or at least one of HCU_Q02A to HCU_Q02J = 1, set PAS_Q11 = 1.

PAS_Q11 In the past 12 months, have you received any health care services?

1  Yes
2  No (Go to PAS_END)
DK, R (Go to PAS_END)

PAS_Q12 Overall, how would you rate the quality of the health care you received?
Would you say it was:
INTERVIEWER: Read categories to respondent.

1  ... excellent?
2  ... good?
3  ... fair?
4  ... poor?
DK, R

PAS_Q13 Overall, how satisfied were you with the way health care services were provided?
Were you:
INTERVIEWER: Read categories to respondent.

1  ... very satisfied?
2  ... somewhat satisfied?
3  ... neither satisfied nor dissatisfied?
4  ... somewhat dissatisfied?
5  ... very dissatisfied?
DK, R

PAS_Q21A In the past 12 months, have you received any health care services at a hospital, for any diagnostic or day surgery service, overnight stay, or as an emergency room patient?

1  Yes
2  No (Go to PAS_Q31A)
DK, R (Go to PAS_Q31A)
PAS_Q21B  Thinking of your most recent hospital visit, were you:

INTERVIEWER: Read categories to respondent.

1  ... admitted overnight or longer (an inpatient)?
2  ... a patient at a diagnostic or day surgery clinic (an outpatient)?
3  ... an emergency room patient?
   DK, R  (Go to PAS_Q31A)

PAS_Q22  (Thinking of this most recent hospital visit:)

... how would you rate the quality of the care you received? Would you say it was:

INTERVIEWER: Read categories to respondent.

1  ... excellent?
2  ... good?
3  ... fair?
4  ... poor?
   DK, R

PAS_Q23  (Thinking of this most recent hospital visit:)

... how satisfied were you with the way hospital services were provided?

Were you:

INTERVIEWER: Read categories to respondent.

1  ... very satisfied?
2  ... somewhat satisfied?
3  ... neither satisfied nor dissatisfied?
4  ... somewhat dissatisfied?
5  ... very dissatisfied?
   DK, R

PAS_Q31A  In the past 12 months, not counting hospital visits, have you received any health care services from a family doctor or other physician?

1  Yes
2  No   (Go to PAS_END)
   DK, R   (Go to PAS_END)

PAS_Q31B  Thinking of the most recent time, was care provided by:

INTERVIEWER: Read categories to respondent.

1  ... a family doctor (general practitioner)?
2  ... a medical specialist?
   DK, R   (Go to PAS_END)

PAS_Q32  (Thinking of this most recent care from a physician:)

... how would you rate the quality of the care you received? Would you say it was:

INTERVIEWER: Read categories to respondent.

1  ... excellent?
2  ... good?
3  ... fair?
4  ... poor?
   DK, R
(Thinking of this most recent care from a physician:)

… how satisfied were you with the way physician care was provided?
Were you:
INTERVIEWER: Read categories to respondent.

1 … very satisfied?
2 … somewhat satisfied?
3 … neither satisfied nor dissatisfied?
4 … somewhat dissatisfied?
5 … very dissatisfied?
DK, R
Patient satisfaction – Community-based care (PSC)

PSC_BEG

If (do PSC block = 1), go to PSC_C11B. Otherwise, go to PSC_END.

PSC_C11B

If proxy interview or if age < 15, go to PSC_END. Otherwise, go to PSC_C11C.

PSC_C11C

If PAS_Q11 <> 1 and HCU_Q01BA <> 1 and all of (HCU_Q02A to HCU_Q02J) <> 1 go to PSC_END. Otherwise, go to PSC_R1.

PSC_R1

The next questions are about community-based health care which includes any health care received outside of a hospital or doctor's office.

Examples are: home nursing care, home-based counselling or therapy, personal care and community walk-in clinics.

INTERVIEWER: Press <Enter> to continue.

PSC_Q41

In the past 12 months, have you received any community-based care?

PSC_1

1 Yes
2 No (Go to PSC_END)
   DK, R (Go to PSC_END)

PSC_Q42

Overall, how would you rate the quality of the community-based care you received?

Would you say it was:

INTERVIEWER: Read categories to respondent.

1 ... excellent?
2 ... good?
3 ... fair?
4 ... poor?
   DK, R

PSC_Q43

Overall, how satisfied were you with the way community-based care was provided?

Were you:

INTERVIEWER: Read categories to respondent.

1 ... very satisfied?
2 ... somewhat satisfied?
3 ... neither satisfied nor dissatisfied?
4 ... somewhat dissatisfied?
5 ... very dissatisfied?
   DK, R

PSC_END
Restriction of activities (RAC)

RAC_BEG

RAC_C1  If (do RAC block = 1), go to RAC_R1. Otherwise, go to RAC_END.

RAC_R1  The next few questions deal with any current limitations in your daily activities caused by a long-term health condition or problem. In these questions, a “long-term condition” refers to a condition that is expected to last or has already lasted 6 months or more.

INTERVIEWER: Press <Enter> to continue.

RAC_Q1

^DOVERB ^YOU have any difficulty hearing, seeing, communicating, walking, climbing stairs, bending, learning or doing any similar activities?

INTERVIEWER: Read categories to respondent.

1  Sometimes
2  Often
3  Never
   DK
   R  (Go to RAC_END)

RAC_Q2A

Does a long-term physical condition or mental condition or health problem, reduce the amount or the kind of activity ^YOU can do:

... at home?

INTERVIEWER: Read categories to respondent.

1  Sometimes
2  Often
3  Never
   DK
   R  (Go to RAC_END)

RAC_Q2B_1

(Does a long-term physical condition or mental condition or health problem, reduce the amount or the kind of activity ^YOU can do):

... at school?

1  Sometimes
2  Often
3  Never
4  Does not attend school
   DK
   R  (Go to RAC_END)

RAC_Q2B_2

(Does a long-term physical condition or mental condition or health problem, reduce the amount or the kind of activity ^YOU can do):

... at work?

1  Sometimes
2  Often
3  Never
4  Does not work at a job
   DK
   R  (Go to RAC_END)
RAC_Q2C (Does a long-term physical condition or mental condition or health problem, reduce the amount or the kind of activity YOU can do:)

... in other activities, for example, transportation or leisure?

1 Sometimes
2 Often
3 Never
DK
R (Go to RAC_END)

RAC_C5 If respondent has difficulty or is limited in activities (RAC_Q1 = 1 or 2) or (RAC_Q2A-C = 1 or 2), go to RAC_C5A. Otherwise, go to RAC_Q6A.

RAC_C5A If (RAC_Q2A to RAC_Q2C = 3 or 4) and RAC_Q1 < 3 go to RAC_R5. Otherwise, go to RAC_Q5.

RAC_R5 You reported that YOU HAVE difficulty hearing, seeing, communicating, walking, climbing stairs, bending, learning or doing any similar activities.

RAC_Q5 Which one of the following is the best description of the cause of this condition?

RAC_5 INTERVIEWER: Read categories to respondent.

1 Accident at home
2 Motor vehicle accident
3 Accident at work
4 Other type of accident
5 Existed from birth or genetic
6 Work conditions
7 Disease or illness
8 Ageing
9 Emotional or mental health problem or condition
10 Use of alcohol or drugs
11 Other - Specify
DK, R

RAC_C5S If RAC_Q5 = 11, go to RAC_Q5S. Otherwise, go to RAC_Q6A.

RAC_Q5S INTERVIEWER: Specify.

________________________ (80 spaces)
DK, R

RAC_Q6A The next few questions may not apply to YOU, but we need to ask the same questions of everyone.

Because of any physical condition or mental condition or health problem, DOVERB YOU need the help of another person:

... with preparing meals?

1 Yes
2 No
DK, R
(Because of any physical condition or mental condition or health problem, \text{YOU} need the help of another person:)

... with getting to appointments and running errands such as shopping for groceries?

1  Yes
2  No
   DK, R

(Because of any physical condition or mental condition or health problem, \text{YOU} need the help of another person:)

... with doing everyday housework?

1  Yes
2  No
   DK, R

(Because of any physical condition or mental condition or health problem, \text{YOU} need the help of another person:)

... with personal care such as washing, dressing, eating or taking medication?

1  Yes
2  No
   DK, R

(Because of any physical condition or mental condition or health problem, \text{YOU} need the help of another person:)

... with moving about inside the house?

1  Yes
2  No
   DK, R

(Because of any physical condition or mental condition or health problem, \text{YOU} need the help of another person:)

... with looking after \text{YOUR} personal finances such as making bank transactions or paying bills?

1  Yes
2  No
   DK, R
Flu shots (FLU)

**FLU_BEG**

- **FLU_C1**: If (do FLU block = 1), then go to FLU_C160. Otherwise, go to FLU_END.
- **FLUFDO**: Otherwise, go to FLU_END.
- **FLU_C160**: If proxy interview, go to FLU_END. Otherwise, go to FLU_Q160.

**FLU_Q160**

Now a few questions about your use of various health care services.

**FLU_160**: Have you ever had a flu shot?
- 1 Yes
- 2 No (Go to FLU_Q166)
- DK, R (Go to FLU_END)

**FLU_Q162**

When did you have your last flu shot?

**INTERVIEWER**: Read categories to respondent.

- 1 Less than 1 year ago
- 2 1 year to less than 2 years ago
- 3 2 years ago or more
- DK, R (Go to FLU_END)

**FLU_C164**: If FLU_Q162 = 2 OR 3, go to FLU_Q166. Otherwise, go to FLU_Q164.

**FLU_Q164**

In which month did you have your last flu shot?

**FLU_164**

- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December
- DK, R

**FLU_C165**: If FLU_Q164 = current month], go to FLU_Q165. Otherwise, go to FLU_END.

**FLU_Q165**

Was that this year or last year?

- 1 This year
- 2 Last year
- DK, R

Go to FLU_END.
**FLU_Q166**  
What are the reasons that you have not had a flu shot in the past year?  
INTERVIEWER: Mark all that apply.

<table>
<thead>
<tr>
<th>Code</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>FLU_66A</td>
<td>1 Have not gotten around to it</td>
</tr>
<tr>
<td>FLU_66B</td>
<td>2 Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>FLU_66C</td>
<td>3 Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>FLU_66D</td>
<td>4 Personal or family responsibilities</td>
</tr>
<tr>
<td>FLU_66E</td>
<td>5 Not available - at time required</td>
</tr>
<tr>
<td>FLU_66F</td>
<td>6 Not available - at all in the area</td>
</tr>
<tr>
<td>FLU_66G</td>
<td>7 Waiting time was too long</td>
</tr>
<tr>
<td>FLU_66H</td>
<td>8 Transportation - problems</td>
</tr>
<tr>
<td>FLU_66I</td>
<td>9 Language - problem</td>
</tr>
<tr>
<td>FLU_66J</td>
<td>10 Cost</td>
</tr>
<tr>
<td>FLU_66K</td>
<td>11 Did not know where to go / uninformed</td>
</tr>
<tr>
<td>FLU_66L</td>
<td>12 Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>FLU_66M</td>
<td>13 Bad reaction to previous shot</td>
</tr>
<tr>
<td>FLU_66O</td>
<td>14 Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>FLU_66N</td>
<td>15 Other - Specify</td>
</tr>
</tbody>
</table>

DK, R

**FLU_C166S**  
If FLU_Q166 = 15, go to FLU_Q166S.  
Otherwise, go to FLU_END.

**FLU_Q166S**  
INTERVIEWER: Specify.

_________________________  
(80 spaces)

DK, R

**FLU_END**
**Blood test (BLT)**

**BLT_BEG**

**BLT_C01A** If (do BLT block = 1), go to BLT_C01B. Otherwise, go to BLT_END.

**BLT_C01B** If proxy interview, go to BLT_END. Otherwise, go to BLT_C01C.

**BLT_C01C** If age < 35, go to BLT_END. Otherwise, go to BLT_Q01.

**BLT_Q01** In the past 12 months, did a health professional order a blood test for you?

**BLT_01**

1. Yes
2. No (Go to BLT_END)
   DK, RF (Go to BLT_END)

**BLT_Q02** Why was your most recent blood test ordered?

**INTERVIEWER**: Read categories to respondent. Mark all that apply.

1. For assessment as part of a general physical check-up
2. To monitor an existing health condition
3. To check for a new specific disease or health condition
4. As the result of an emergency (for example, heart attack, food poisoning, car accident)
5. Other - specify

**BLT_C02A** If BLT_Q02 = 5, go to BLT_S02. Otherwise, go to BLT_C02B.

**BLT_S02** **INTERVIEWER**: Specify.

(80 spaces)
DK, RF

**BLT_C02B** If BLT_Q02 = 2 or 3, go to BLT_Q03. Otherwise, go to BLT_END.

**BLT_Q03** For which health conditions was your last blood test ordered?

**INTERVIEWER**: Mark all that apply.

1. High cholesterol or other heart-related conditions
2. Diabetes
3. Thyroid
4. Prostate
5. Infectious disease
6. Liver function
7. Hormone-related
8. Other – specify
   DK, RF

**BLT_C03** If BLT_Q03 = 8, go to BLT_S03. Otherwise, go to BLT_END.
INTERVIEWER: Specify.

(80 spaces)

DK, RF
Blood pressure check (BPC)

BPC_BEG

BPC_C01 If (do BPC block = 2) or proxy interview, go to BPC_END.
BPCFOPT Otherwise, go to BPC_Q010.

BPC_Q010 (Now blood pressure)
BPC_010 Have you ever had your blood pressure taken?
1 Yes
2 No (Go to BPC_C016)
DK, RF (Go to BPC_END)

BPC_Q012 When was the last time?
BPC_012
1 Less than 6 months ago
2 6 months to less than 1 year ago
3 1 year to less than 2 years ago
4 2 years to less than 5 years ago
5 5 or more years ago
DK, RF (Go to BPC_END)

BPC_C012A If BPC_Q012 < 4, go to BPC_C012B.
Otherwise, go to BPC_C016.

BPC_C012B If sex = female and (14 < age < 56), go to BPC_Q013.
Otherwise, go to BPC_END.

BPC_Q013 Were you pregnant the last time your blood pressure was taken?
BPC_013
1 Yes
2 No
NSP, RF
Go to BPC_END

BPC_C016 If age < 25, go to BPC_END.
Otherwise, go to BPC_Q016.

BPC_Q016 What are the reasons that you have not had your blood pressure taken in the past 2 years?
INTERVIEWER: Mark all that apply.
BPC_16A Have not gotten around to it
BPC_16B Respondent - did not think it was necessary
BPC_16C Doctor - did not think it was necessary
BPC_16D Personal or family responsibilities
BPC_16E Not available - at time required
BPC_16F Not available - at all in the area
BPC_16G Waiting time was too long
BPC_16H Transportation - problems
BPC_16I Language - problem
BPC_16J Cost
BPC_16K Did not know where to go / uninformed
BPC_16L Fear (e.g., painful, embarrassing, find something wrong)
BPC_16N Unable to leave the house because of a health problem
BPC_16M Other
DK, RF

BPC_END

Optional Content selected by health regions in: Alberta and Northwest Territories
PAP smear test (PAP)

PAP_BEG

PAP_C1 If (do PAP block = 1), go to PAP_C020. Otherwise, go to PAP_END.

PAP_C020 If proxy interview or male or age < 18, go to PAP_END. Otherwise, go to PAP_Q020.

PAP_Q020 (Now PAP tests)

PAP_Q020 Have you ever had a PAP smear test?

1 Yes
2 No (Go to PAP_Q026)
   DK, R (Go to PAP_END)

PAP_Q022 When was the last time?

PAP_Q022

1 Less than 6 months ago (Go to PAP_END)
2 6 months to less than 1 year ago (Go to PAP_END)
3 1 year to less than 3 years ago (Go to PAP_END)
4 3 years to less than 5 years ago (Go to PAP_END)
5 5 or more years ago (Go to PAP_END)
   DK, R

PAP_Q026 What are the reasons that you have not had a PAP smear test in the past 3 years?

INTERVIEWER: Mark all that apply.

PAP_26A 1 Have not gotten around to it
PAP_26B 2 Respondent - did not think it was necessary
PAP_26C 3 Doctor - did not think it was necessary
PAP_26D 4 Personal or family responsibilities
PAP_26E 5 Not available - at time required
PAP_26F 6 Not available - at all in the area
PAP_26G 7 Waiting time was too long
PAP_26H 8 Transportation - problems
PAP_26I 9 Language - problem
PAP_26J 10 Cost
PAP_26K 11 Did not know where to go / uninformed
PAP_26L 12 Fear (e.g., painful, embarrassing, find something wrong)
PAP_26M 13 Have had a hysterectomy
PAP_26N 14 Hate / dislike having one done
PAP_26P 15 Unable to leave the house because of a health problem
PAP_26Q 16 Other
   DK, R

PAP_END
Mammography (MAM)

MAM_BEG

MAM_C1 If (do MAM block = 1), go to MAM_C030. Otherwise, go to MAM_END.

MAM_C030 If proxy interview or male, go to MAM_END. Otherwise, go to MAM_C030A.

MAM_C030A If (female and age < 35), go to MAM_C038. Otherwise, go to MAM_Q030.

MAM_Q030 (Now Mammography)

MAM_Q030 Have you ever had a mammogram, that is, a breast x-ray?

1  Yes
2  No  (Go to MAM_C036)
   DK, R  (Go to MAM_END)

MAM_Q031 Why did you have it?
INTERVIEWER: Mark all that apply. If respondent says "doctor recommended it", probe for reason.

MAM_31A 1 Family history of breast cancer
MAM_31B 2 Part of regular check-up / routine screening
MAM_31C 3 Age
MAM_31D 4 Previously detected lump
MAM_31E 5 Follow-up of breast cancer treatment
MAM_31F 6 On hormone replacement therapy
MAM_31G 7 Breast problem
MAM_31H 8 Other
   DK, R

MAM_Q032 When was the last time?

MAM_Q032 Less than 6 months ago  (Go to MAM_C038)
1 6 months to less than 1 year ago  (Go to MAM_C038)
3 1 year to less than 2 years ago  (Go to MAM_C038)
4 2 years to less than 5 years ago  (Go to MAM_C038)
5 5 or more years ago
   DK, R  (Go to MAM_C038)

MAM_C036 If age < 50 or age > 69, go to MAM_C038. Otherwise, go to MAM_Q036.
**MAM_Q036**  
**What are the reasons you have not had one in the past 2 years?**  
INTERVIEWER: Mark all that apply.

- **MAM_36A** 1 Have not gotten around to it  
- **MAM_36B** 2 Respondent - did not think it was necessary  
- **MAM_36C** 3 Doctor - did not think it was necessary  
- **MAM_36D** 4 Personal or family responsibilities  
- **MAM_36E** 5 Not available - at time required  
- **MAM_36F** 6 Not available - at all in the area  
- **MAM_36G** 7 Waiting time was too long  
- **MAM_36H** 8 Transportation - problems  
- **MAM_36I** 9 Language - problem  
- **MAM_36J** 10 Cost  
- **MAM_36K** 11 Did not know where to go / uninformed  
- **MAM_36L** 12 Fear (e.g., painful, embarrassing, find something wrong)  
- **MAM_36N** 13 Unable to leave the house because of a health problem  
- **MAM_36O** 14 Breasts removed / Mastectomy  
- **MAM_36M** 15 Other - Specify  

**MAM_C036S**  
If MAM_Q036 = 15, go to MAM_Q036S. Otherwise, go to MAM_C038.

**MAM_Q036S**  
INTERVIEWER: Specify.

_______________________________  
(80 spaces)  
DK, R

**MAM_C038**  
If age < 18, go to MAM_END. Otherwise, go to MAM_C038A.

**MAM_C038A**  
If PAP_Q026 = 13 or if HWT_Q1 = 1, go to MAM_END. Otherwise, go to MAM_Q038.

**MAM_Q038**  
**Have you had a hysterectomy? (in other words, has your uterus been removed)?**

- **MAM_038** 1 Yes  
- **MAM_038** 2 No  

**Note:**  
In processing, if a respondent answered HWT_Q1 = 1, the variable MAM_Q038 is given the value of 2.  
If a respondent answered PAP_Q026 = 13, the variable MAM_Q038 is given the value of 1.

**MAM_END**
Breast examinations (BRX)

BRX_BEG

BRX_C1  If (do BRX block = 1), go to BRX_C110.

BRXFOPT  Otherwise, go to BRX_END.

BRX_C110  If proxy interview or sex = male or age < 18, go to BRX_END.

Otherwise, go to BRX_Q110.

BRX_Q110  (Now breast examinations)

BRX_110  Other than a mammogram, have you ever had your breasts examined for lumps (tumours, cysts) by a doctor or other health professional?

1  Yes
2  No  (Go to BRX_Q116)

DK, R  (Go to BRX_END)

BRX_Q112  When was the last time?

BRX_112

1  Less than 6 months ago  (Go to BRX_END)
2  6 months to less than 1 year ago  (Go to BRX_END)
3  1 year to less than 2 years ago  (Go to BRX_END)
4  2 years to less than 5 years ago
5  5 or more years ago

DK, R  (Go to BRX_END)

BRX_Q116  What are the reasons that you have not had a breast exam in the past 2 years?

INTERVIEWER: Mark all that apply.

BRX_16A  1  Have not gotten around to it
BRX_16B  2  Respondent - did not think it was necessary
BRX_16C  3  Doctor - did not think it was necessary
BRX_16D  4  Personal or family responsibilities
BRX_16E  5  Not available - at time required
BRX_16F  6  Not available - at all in the area
BRX_16G  7  Waiting time was too long
BRX_16H  8  Transportation - problems
BRX_16I  9  Language - problem
BRX_16J  10  Cost
BRX_16K  11  Did not know where to go / uninformed
BRX_16L  12  Fear (e.g., painful, embarrassing, find something wrong)
BRX_16N  13  Unable to leave the house because of a health problem
BRX_16O  14  Breasts removed / mastectomy
BRX_16M  15  Other

DK, R

BRX_END
Breast self-examinations (BSX)

BSX_BEG

BSX_C120A If (do BSX block = 1), go to BSX_C120B.
BSXFOPT Otherwise, go to BSX_END.

BSX_C120B If proxy interview, go to BSX_END.
Otherwise, go to BSX_C120C.

BSX_C120C If male or age < 18, go to BSX_END.
Otherwise, go to BSX_Q120.

BSX_Q120 (Now breast self examinations)

BSX_120 Have you ever examined your breasts for lumps (tumours, cysts)?

1  Yes
2  No (Go to BSX_END)
   DK, R (Go to BSX_END)

BSX_Q121 How often?

BSX_121

1  At least once a month
2  Once every 2 to 3 months
3  Less often than every 2 to 3 months
   DK, R

BSX_Q122 How did you learn to do this?

INTERVIEWER: Mark all that apply.

BSX_22A 1  Doctor
BSX_22B 2  Nurse
BSX_22C 3  Book / magazine / pamphlet
BSX_22D 4  TV / video / film
BSX_22H 5  Family member (e.g., mother, sister, cousin)
BSX_22G 6  Other - Specify
   DK, R

BSX_C122S If BSX_Q122 = 6, go to BSX_Q122S.
Otherwise, go to BSX_END.

BSX_Q122S INTERVIEWER: Specify.

_________________________
  (80 spaces)
   DK, R

BSX_END
Spirometry (SPI)

SPI_BEG

SPI_C01A If (do SPI block = 1), go to SPI_C01B. Otherwise, go to SPI_END.

SPI_C01B If proxy interview, go to SPI_END. Otherwise, go to SPI_Q01.

SPI_Q01 Spirometry is a common lung function test that consists of blowing into a small tube attached to a machine.

Have you ever had this test?

1  Yes (Go to SPI_END)
2  No (Go to SPI_END)
   DK, RF (Go to SPI_END)

SPI_Q02 When was the last time?

1  Less than 6 months ago
2  6 months to less than 1 year ago
3  1 year to less than 2 years ago
4  2 years to less than 5 years ago
5  5 or more years ago
   DK, RF

SPI_END
Physical check-up (PCU)

PCU_C01A If (do PCU block = 1), go to PCU_C01B. Otherwise, go to PCU_END.

PCU_C01B If proxy interview, go to PCU_END. Otherwise, go to PCU_R01.

PCU_R01 Next I would like to ask you some questions related to general physical check-ups. Please do not include check-ups you may have had during a visit for a specific health problem ^pregnancy.
INTerviewer: Press <Enter> to continue.

PCU_D01 If sex = female and age is between (15 and 55), then ^pregnancy = “or during a pregnancy”. Otherwise, ^pregnancy = empty.

PCU_Q150 Have you ever had a general physical check-up?
PcU_150
1 Yes
2 No (Go to PCU_Q154)
DK, RF (Go to PCU_END)

PCU_Q152 How often do you usually have a general physical check-up?
PcU_153
1 More than once a year
2 Once a year
3 Once every 2 years
4 Once every 3 years
5 Less than once every 3 years
6 No regular pattern
DK, RF

PCU_Q153 When was the last time?
PcU_152
1 Less than 1 year ago
2 1 year to less than 2 years ago
3 2 years to less than 3 years ago
4 3 years to less than 4 years ago
5 4 years to less than 5 years ago
6 5 or more years ago
DK, RF

PCU_C153 If PCU_Q153 < 4, go to PCU_Q155. Otherwise, go to PCU_Q154.
What are the reasons that you have not had a general physical check-up in the past 3 years?
INTERVIEWER: Mark all that apply.

1. Have not gotten around to it
2. Respondent - did not think it was necessary
3. Doctor - did not think it was necessary
4. Personal or family responsibilities
5. Not available - at time required
6. Not available - at all in the area
7. Waiting time was too long
8. Transportation - problems
9. Language - problem
10. Cost
11. Did not know where to go / uninformed
12. Fear (e.g., painful, embarrassing, find something wrong)
13. Unable to leave the house because of a health problem
14. Other - Specify

If PCU_Q154 = 14, go to PCU_S154. Otherwise, go to PCU_END.

INTERVIEWER: Specify.

__________________________________________________________
(80 spaces)

Go to PCU_END

During your last general physical check-up, did a health professional weigh you?

1. Yes
2. No

(During your last general physical check-up,)

...did a health professional measure your height?

1. Yes
2. No

(During your last general physical check-up,)

...did a health professional check your blood pressure?

1. Yes
2. No
(During your last general physical check-up,) 

…did a health professional discuss with you any risks that your weight might pose to your health?

1  Yes
2  No
   DK, RF

PCU_END
Prostate cancer screening (PSA)

PSA_BEG

PSA_C1 If (do PSA block = 1), go to PSA_C170. Otherwise, go to PSA_END.

PSAFOPT Otherwise, go to PSA_END.

PSA_C170 If proxy interview, go to PSA_END. Otherwise, go to PSA_C170A.

PSA_C170A If female or age < 35, go to PSA_END. Otherwise, go to PSA_Q170.

PSA_Q170 (Now Prostate tests)

PSA_170 Have you ever had a prostate specific antigen test for prostate cancer, that is, a PSA blood test?

1 Yes
2 No  (Go to PSA_Q174)
DK  (Go to PSA_Q174)
R  (Go to PSA_END)

PSA_Q172 When was the last time?

PSA_172

1 Less than 1 year ago
2 1 year to less than 2 years ago
3 2 years to less than 3 years ago
4 3 years to less than 5 years ago
5 5 or more years ago
DK, R

PSA_Q173 Why did you have it?

INTERVIEWER: Mark all that apply.

If respondent says 'Doctor recommended it' or 'I requested it', probe for reason.

PSA_73A 1 Family history of prostate cancer
PSA_73B 2 Part of regular check-up / routine screening
PSA_73C 3 Age
PSA_73G 4 Race
PSA_73D 5 Follow-up of problem
PSA_73E 6 Follow-up of prostate cancer treatment
PSA_73F 7 Other - Specify
DK, R

PSA_C173S If PSA_Q173 = 7, go to PSA_Q173S. Otherwise, go to PSA_Q174.

PSA_Q173S INTERVIEWER: Specify.

________________________

(80 spaces)
DK, R
A Digital Rectal Exam is an exam in which a gloved finger is inserted into the rectum in order to feel the prostate gland. Have you ever had this exam?

1  Yes
2  No  (Go to PSA_END)
   DK, R  (Go to PSA_END)

When was the last time?

1  Less than 1 year ago
2  1 year to less than 2 years ago
3  2 years to less than 3 years ago
4  3 years to less than 5 years ago
5  5 or more years ago
   DK, R  (Go to PSA_END)
Colorectal cancer screening (CCS)

CCS_BEG

CCS_C180A If (do CCS block = 1), go to CCS_C180B
CCSFOPT Otherwise, go to CCS_END.

CCS_C180B If proxy interview or age < 35, go to CCS_END.
Otherwise, go to CCS_Q180.

CCS_Q180

Now a few questions about various colorectal exams.

An FOBT is a test to check for blood in your stool, where you have a bowel movement and use a stick to smear a small sample on a special card.

Have you ever had this test?

1  Yes
2  No   (Go to CCS_Q184)
   DK (Go to CCS_Q184)
   R   (Go to CCS_END)

CCS_Q182

When was the last time?

1  Less than 1 year ago
2  1 year to less than 2 years ago
3  2 years to less than 3 years ago
4  3 years to less than 5 years ago
5  5 years to less than 10 years ago
6  10 or more years ago
   DK, R

CCS_Q183

Why did you have it?
INTERVIEWER: Mark all that apply.
If respondent says 'Doctor recommended it' or 'I requested it', probe for reason.

CCS_83A  1 Family history of colorectal cancer
CCS_83B  2 Part of regular check-up / routine screening
CCS_83C  3 Age
CCS_83G  4 Race
CCS_83D  5 Follow-up of problem
CCS_83E  6 Follow-up of colorectal cancer treatment
CCS_83F  7 Other - Specify
   DK, R

CCS_C183S If CCS_Q183 = 7, go to CCS_S183.
Otherwise, go to CCS_Q184.

CCS_Q183S INTERVIEWER: Specify.

________________________
(80 spaces)
   DK, R
A colonoscopy or sigmoidoscopy is when a tube is inserted into the rectum to view the bowel for early signs of cancer and other health problems.

Have you ever had either of these exams?

1. Yes
2. No (Go to CCS.END)
   DK, R (Go to CCS.END)

When was the last time?

1. Less than 1 year ago
2. 1 year to less than 2 years ago
3. 2 years to less than 3 years ago
4. 3 years to less than 5 years ago
5. 5 years to less than 10 years ago
6. 10 or more years ago
   DK, R

Why did you have it?

INTERVIEWER: Mark all that apply.
   If respondent says “Doctor recommended it” or “I requested it”, probe for reason.

1. Family history of colorectal cancer
2. Part of regular check-up / routine screening
3. Age
4. Race
5. Follow-up of problem
6. Follow-up of colorectal cancer treatment
7. Other - Specify
   DK, R

If CCS_Q186 = 7, go to CCS_S186.
Otherwise, go to CCS_C187.

INTERVIEWER: Specify

(80 spaces)
DK, R

If CCS_Q180 = 1 (had a FOBT), go to CCS_Q187.
Otherwise, go to CCS_END.

Was the colonoscopy or sigmoidoscopy a follow-up of the results of an FOBT?

1. Yes
2. No
   DK, R
Eye examinations (EYX)

EYX_BEG

EYX_C140A If (EYX block = 2) or proxy interview, go to EYX_END.

EYXFOPT Otherwise, go to EYX_C140B.

EYX_C140B If HCU_Q02B = 2, DK or R (not seen or talked to an eye specialist) or EMPTY (Module not asked), go to EYX_Q142.

Otherwise, go to EYX_Q140.

EYX_Q140 (Now eye examinations)

EYX_140 It was reported earlier that you have “seen” or “talked to” an optometrist or ophthalmologist in the past 12 months. Did you actually visit one?

1 Yes (Go to EYX_END)
2 No
   DK, R (Go to EYX_END)

EYX_Q142 (Now eye examinations)

EYX_142 When did you last have an eye examination?

1 Less than 1 year ago (Go to EYX_END)
2 1 year to less than 2 years ago (Go to EYX_END)
3 2 years to less than 3 years ago
4 3 or more years ago
5 Never
   DK, R (Go to EYX_END)

Note: In processing, if a respondent answered EYX_Q140 = 1, the variable EYX_Q142 is given the value of 1.

EYX_Q146 What are the reasons that you have not had an eye examination in the past 2 years?

INTERVIEWER: Mark all that apply.

EYX_46A 1 Have not gotten around to it
EYX_46B 2 Respondent - did not think it was necessary
EYX_46C 3 Doctor - did not think it was necessary
EYX_46D 4 Personal or family responsibilities
EYX_46E 5 Not available - at time required
EYX_46F 6 Not available - at all in the area
EYX_46G 7 Waiting time was too long
EYX_46H 8 Transportation - problems
EYX_46I 9 Language - problem
EYX_46J 10 Cost
EYX_46K 11 Did not know where to go / uninformed
EYX_46L 12 Fear (e.g., painful, embarrassing, find something wrong)
EYX_46N 13 Unable to leave the house because of a health problem
EYX_46M 14 Other
   DK, R

EYX_END
Dental visits (DEN)

DEN_BEG

DEN_C130A If (do DEN block = 1), go to DEN_C130B.
DENFOPT Otherwise, go to DEN_END.

DEN_C130B If proxy interview, go to DEN_END.
Otherwise, go to DEN_C130C.

DEN_C130C If HCU_Q02E = 2, DK or R, go to DEN_Q132.
Otherwise, go to DEN_Q130.

DEN_Q130 (Now dental visits)

DEN_130 It was reported earlier that you have “seen” or “talked to” a dentist in the past 12 months. Did you actually visit one?

1 Yes (Go to DEN_END)
2 No
   DK, R (Go to DEN_END)

DEN_Q132 (Now dental visits)

DEN_132 When was the last time that you went to a dentist?

1 Less than 1 year ago
2 1 year to less than 2 years ago (Go to DEN_END)
3 2 years to less than 3 years ago (Go to DEN_END)
4 3 years to less than 4 years ago (Go to DEN_Q136)
5 4 years to less than 5 years ago (Go to DEN_Q136)
6 5 or more years ago (Go to DEN_Q136)
7 Never
   DK, R (Go to DEN_Q136)
   (Go to DEN_END)

Note: In processing, if a respondent answered DEN_Q130 = 1, the variable DEN_Q132 is given the value of 1.

DEN_E132 Inconsistent answers have been entered. The respondent went to a dentist less than 1 year ago but previously reported that he/she had not “seen” or “talked” to a dentist in the past 12 months. Please confirm.

Trigger soft edit if DEN_Q132 = 1 and HCU_Q02E = 2.

DEN_C133 If DEN_Q132 = 1, go to DEN_END.
**DEN_Q136 What are the reasons that you have not been to a dentist in the past 3 years?**

INTERVIEWER: Mark all that apply.

<table>
<thead>
<tr>
<th>Option</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEN_36A</td>
<td>1 Have not gotten around to it</td>
</tr>
<tr>
<td>DEN_36B</td>
<td>2 Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>DEN_36C</td>
<td>3 Dentist - did not think it was necessary</td>
</tr>
<tr>
<td>DEN_36D</td>
<td>4 Personal or family responsibilities</td>
</tr>
<tr>
<td>DEN_36E</td>
<td>5 Not available - at time required</td>
</tr>
<tr>
<td>DEN_36F</td>
<td>6 Not available - at all in the area</td>
</tr>
<tr>
<td>DEN_36G</td>
<td>7 Waiting time was too long</td>
</tr>
<tr>
<td>DEN_36H</td>
<td>8 Transportation - problems</td>
</tr>
<tr>
<td>DEN_36I</td>
<td>9 Language - problem</td>
</tr>
<tr>
<td>DEN_36J</td>
<td>10 Cost</td>
</tr>
<tr>
<td>DEN_36K</td>
<td>11 Did not know where to go / uninformed</td>
</tr>
<tr>
<td>DEN_36L</td>
<td>12 Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>DEN_36M</td>
<td>13 Wears dentures</td>
</tr>
<tr>
<td>DEN_36N</td>
<td>14 Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>DEN_36O</td>
<td>15 Other</td>
</tr>
<tr>
<td>DK</td>
<td>R</td>
</tr>
</tbody>
</table>
Oral health 2 (OH2)

OH2_BEG
If (do OH2 block = 1), go to OH2_C10B.
Otherwise, go to OH2_END.

OH2FOPT
Otherwise, go to OH2_END.

OH2_C10B
If proxy interview, go to OH2_END.
Otherwise, go to OH2_C10C.

OH2_C10C
If DEN_Q132 = 7 (never goes to dentist), go to OH2_Q11.
Otherwise, go to OH2_Q10.

OH2_Q10
Do you usually visit the dentist:
INTERVIEWER: Read categories to respondent.

1  ... more than once a year for check-ups?
2  ... about once a year for check-ups?
3  ... less than once a year for check-ups?
4  ... only for emergency care?
DK, R  (Go to OH2_END)

OH2_Q11
Do you have insurance that covers all or part of your dental expenses?

1  Yes
2  No  (Go to OH2_C12)
DK, R  (Go to OH2_C12)

OH2_Q11A
Is it:
INTERVIEWER: Read categories to respondent. Mark all that apply.

OH2_11A 1  ... a government-sponsored plan?
OH2_11B 2  ... an employer-sponsored plan?
OH2_11C 3  ... a private plan?
DK, R

OH2_C12
If DEN_Q130 = 1 or DEN_Q132 = 1 (went to the dentist in the past year), go to OH2_Q12.
Otherwise, go to OH2_Q20.

OH2_Q12
In the past 12 months, have you had any teeth removed by a dentist?

1  Yes
2  No  (Go to OH2_Q20)
DK, R  (Go to OH2_Q20)

OH2_Q13
(In the past 12 months,) were any teeth removed because of decay or gum disease?

1  Yes
2  No
DK, R

OH2_Q20
Do you have one or more of your own teeth?

1  Yes
2  No
DK, R
OH2_C21  If DEN_Q136 = 13, go to OH2_Q22. Otherwise, go to OH2_Q21.

OH2_Q21  Do you wear dentures or false teeth?

1  Yes
2  No
DK, R

Note: In processing, if a respondent answered DEN_Q136 = 13, the variable OH2_Q21 is given the value of 1.

OH2_R22  Now we have some additional questions about oral health, that is the health of your teeth and mouth.
INTERVIEWER: Press <Enter> to continue.

OH2_Q22  Because of the condition of your [teeth, mouth or dentures/teeth or mouth], do you have difficulty pronouncing any words or speaking clearly?

1  Yes
2  No
DK, R

Note: If OH2_Q21= 1 or DEN_Q136 = 13, use "teeth, mouth or dentures". Otherwise, use "teeth or mouth".

OH2_Q23  In the past 12 months, how often have you avoided:

... conversation or contact with other people, because of the condition of your [teeth, mouth or dentures/teeth or mouth]?
INTERVIEWER: Read categories to respondent.

1  Often
2  Sometimes
3  Rarely
4  Never
DK, R

Note: If OH2_Q21= 1 or DEN_Q136 = 13, use "teeth, mouth or dentures". Otherwise, use "teeth or mouth".

OH2_Q24  (In the past 12 months, how often have you avoided:)

... laughing or smiling, because of the condition of your [teeth, mouth or dentures/teeth or mouth]?

1  Often
2  Sometimes
3  Rarely
4  Never
DK, R

Note: If OH2_Q21= 1 or DEN_Q136 = 13, use "teeth, mouth or dentures". Otherwise, use "teeth or mouth".

OH2_R25  Now some questions about the health of your teeth and mouth during the past month.
INTERVIEWER: Press <Enter> to continue.
In the past month, have you had:

… a toothache?

1  Yes
2  No
   DK, R

In the past month, were your teeth:

… sensitive to hot or cold food or drinks?

1  Yes
2  No
   DK, R

In the past month, have you had:

… pain in or around the jaw joints?

1  Yes
2  No
   DK, R

(In the past month, have you had:)

… other pain in the mouth or face?

1  Yes
2  No
   DK, R

(In the past month, have you had:)

… bleeding gums?

1  Yes
2  No
   DK, R

(In the past month, have you had:)

… dry mouth?

INTERVIEWER: Do not include thirst caused by exercise.

1  Yes
2  No
   DK, R

(In the past month, have you had:)

… bad breath?

1  Yes
2  No
   DK, R

If OH2_Q20 = 1, go to OH2_Q30. Otherwise, go to OH2_END.
<table>
<thead>
<tr>
<th></th>
<th>How often do you brush your teeth?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>More than twice a day</td>
</tr>
<tr>
<td>2</td>
<td>Twice a day</td>
</tr>
<tr>
<td>3</td>
<td>Once a day</td>
</tr>
<tr>
<td>4</td>
<td>Less than once a day but more than once a week</td>
</tr>
<tr>
<td>5</td>
<td>Once a week</td>
</tr>
<tr>
<td>6</td>
<td>Less than once a week</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>
Food choices (FDC)

FDC_BEG

FDC_C1A If (do FDC block = 1), go to FDC_C1B.
FDCFOPT Otherwise, go to FDC_END.

FDC_C1B If proxy interview, go to FDC_END.
Otherwise, go to FDC_R1.

FDC_R1 Now, some questions about the foods you eat.
INTERVIEWER: Press <Enter> to continue.

FDC_Q1A Do you choose certain foods or avoid others:

FDC_1A … because you are concerned about your body weight?
1 Yes (or sometimes)
2 No
DK, R (Go to FDC_END)

FDC_Q1B (Do you choose certain foods or avoid others:)

FDC_1B … because you are concerned about heart disease?
1 Yes (or sometimes)
2 No
DK, R

FDC_Q1C (Do you choose certain foods or avoid others:)

FDC_1C … because you are concerned about cancer?
1 Yes (or sometimes)
2 No
DK, R

FDC_Q1D (Do you choose certain foods or avoid others:)

FDC_1D … because you are concerned about osteoporosis (brittle bones)?
1 Yes (or sometimes)
2 No
DK, R

FDC_Q2A Do you choose certain foods because of:

FDC_2A … the lower fat content?
1 Yes (or sometimes)
2 No
DK, R
(Do you choose certain foods because of:)

… the fibre content?

1  Yes (or sometimes)
2  No
  DK, R

(Do you choose certain foods because of:)

… the calcium content?

1  Yes (or sometimes)
2  No
  DK, R

Do you avoid certain foods because of:

… the fat content?

1  Yes (or sometimes)
2  No
  DK, R

(Do you avoid certain foods because of:)

… the type of fat they contain?

1  Yes (or sometimes)
2  No
  DK, R

(Do you avoid certain foods because of:)

… the salt content?

1  Yes (or sometimes)
2  No
  DK, R

(Do you avoid certain foods because of:)

… the cholesterol content?

1  Yes (or sometimes)
2  No
  DK, R

(Do you avoid certain foods because of:)

… the calorie content?

1  Yes (or sometimes)
2  No
  DK, R
Dietary supplement use – Vitamins and minerals (DSU)

DSU_BEG

DSU_C1A If (do DSU block = 1), go to DSU_C1B. Otherwise, go to DSU_END.

DSU_C1B If proxy interview, go to DSU_END. Otherwise, go to DSU_Q1A.

DSU_Q1A Now, some questions about the use of nutritional supplements.

DSU_1A In the past 4 weeks, did you take any vitamin or mineral supplements?

1 Yes
2 No (Go to DSU_END)
DK, R (Go to DSU_END)

DSU_Q1B Did you take them at least once a week?

1 Yes
2 No (Go to DSU_Q1D)
DK, R (Go to DSU_END)

DSU_Q1C Last week, on how many days did you take them?

| | | Days
(MIN: 1) (MAX: 7)
DK, R

Go to DSU_END.

DSU_Q1D In the past 4 weeks, on how many days did you take them?

| | | Days
(MIN: 1) (MAX: 21)
DK, R

DSU_END

Optional Content selected by health regions in:
Yukon and Northwest Territories
Fruit and vegetable consumption (FVC)

FVC_BEG

FVC_C1A  If (do FVC block = 2) or proxy interview, go to FVC_END.
FVCFDO  Otherwise, go to FVC_R1.

FVC_R1  The next questions are about the foods you usually eat or drink. Think about all the foods you eat, both meals and snacks, at home and away from home.
INTERVIEWER: Press <Enter> to continue.

FVC_Q1A  How often do you usually drink fruit juices such as orange, grapefruit or tomato?
(For example: once a day, three times a week, twice a month)
INTERVIEWER: Select the reporting period here and enter the number in the next screen.

1  Per day
2  Per week  (Go to FVC_N1C)
3  Per month  (Go to FVC_N1D)
4  Per year  (Go to FVC_N1E)
5  Never  (Go to FVC_Q2A)
DK, R  (Go to FVC_END)

FVC_Q1A

FVC_1B  INTERVIEWER: Enter number of times per day.

I I I  Times
(MIN: 1) (MAX: 20)
DK, R

Go to FVC_Q2A

FVC_N1B

FVC_1C  INTERVIEWER: Enter number of times per week.

I I I  Times
(MIN: 1) (MAX: 90)
DK, R

Go to FVC_Q2A

FVC_N1C

FVC_1D  INTERVIEWER: Enter number of times per month.

I I I I  Times
(MIN: 1) (MAX: 200)
DK, R

Go to FVC_Q2A

FVC_N1D

FVC_1E  INTERVIEWER: Enter number of times per year.

I I I I I  Times
(MIN: 1) (MAX: 500)
DK, R

FVC_N1E
Not counting juice, how often do you usually eat fruit?

INTERVIEWER: Select the reporting period here and enter the number in the next screen.

1  Per day
2  Per week   (Go to FVC_N2C)
3  Per month  (Go to FVC_N2D)
4  Per year   (Go to FVC_N2E)
5  Never     (Go to FVC_Q3A)
    DK, R     (Go to FVC_Q3A)

INTERVIEWER: Enter number of times per day.

Times
(MIN: 1) (MAX: 20)
DK, R

Go to FVC_Q3A

INTERVIEWER: Enter number of times per week.

Times
(MIN: 1) (MAX: 90)
DK, R

Go to FVC_Q3A

INTERVIEWER: Enter number of times per month.

Times
(MIN: 1) (MAX: 200)
DK, R

Go to FVC_Q3A

INTERVIEWER: Enter number of times per year.

Times
(MIN: 1) (MAX: 500)
DK, R

How often do you (usually) eat green salad?

INTERVIEWER: Select the reporting period here and enter the number in the next screen.

1  Per day
2  Per week   (Go to FVC_N3C)
3  Per month  (Go to FVC_N3D)
4  Per year   (Go to FVC_N3E)
5  Never     (Go to FVC_Q4A)
    DK, R     (Go to FVC_Q4A)

INTERVIEWER: Enter number of times per day.

Times
(MIN: 1) (MAX: 20)
DK, R

Go to FVC_Q4A
FVC_N3C  INTERVIEWER: Enter number of times per week.

   I I I I Times
   (MIN: 1) (MAX: 90)
   DK, R

   Go to FVC_Q4A

FVC_N3D  INTERVIEWER: Enter number of times per month.

   I I I I I Times
   (MIN: 1) (MAX: 200)
   DK, R

   Go to FVC_Q4A

FVC_N3E  INTERVIEWER: Enter number of times per year.

   I I I I I Times
   (MIN: 1) (MAX: 500)
   DK, R

FVC_Q4A  How often do you usually eat potatoes, not including french fries, fried potatoes, or potato chips?

   INTERVIEWER: Select the reporting period here and enter the number in the next screen.

   1  Per day
   2  Per week (Go to FVC_N4C)
   3  Per month (Go to FVC_N4D)
   4  Per year (Go to FVC_N4E)
   5  Never  (Go to FVC_Q5A)
   DK, R  (Go to FVC_Q5A)

FVC_N4B  INTERVIEWER: Enter number of times per day.

   I I I I Times
   (MIN: 1) (MAX: 20)
   DK, R

   Go to FVC_Q5A

FVC_N4C  INTERVIEWER: Enter number of times per week.

   I I I I Times
   (MIN: 1) (MAX: 90)
   DK, R

   Go to FVC_Q5A

FVC_N4D  INTERVIEWER: Enter number of times per month.

   I I I I I Times
   (MIN: 1) (MAX: 200)
   DK, R

   Go to FVC_Q5A
**How often do you (usually) eat carrots?**

**INTERVIEWER:** Select the reporting period here and enter the number in the next screen.

1. Per day
2. Per week (Go to FVC_N5C)
3. Per month (Go to FVC_N5D)
4. Per year (Go to FVC_N5E)
5. Never (Go to FVC_Q6A)
FVC_6B INTERVIEWER: Enter number of servings per day.
I _ _ _ Servings
(MIN: 1) (MAX: 20)
DK, R
Go to FVC_END

FVC_6C INTERVIEWER: Enter number of servings per week.
I _ _ _ Servings
(MIN: 1) (MAX: 90)
DK, R
Go to FVC_END

FVC_6D INTERVIEWER: Enter number of servings per month.
I _ _ _ _ Servings
(MIN: 1) (MAX: 200)
DK, R
Go to FVC_END

FVC_6E INTERVIEWER: Enter number of servings per year.
I _ _ _ _ Servings
(MIN: 1) (MAX: 500)
DK, R

FVC_END
Physical activities (PAC)

PAC_BEG

PAC_C1  If (do PAC block = 1), go to PAC_C2. Otherwise, go to PAC_END.

PAC_C2  If proxy interview, go to PAC_END.

PAC_R1  Now I'd like to ask you about some of your physical activities. To begin with, I'll be dealing with physical activities not related to work, that is, leisure time activities.

INTERVIEWER: Press <Enter> to continue.

PAC_Q1  Have you done any of the following in the past 3 months, that is, from [date three months ago] to yesterday?

INTERVIEWER: Read categories to respondent. Mark all that apply.

PAC_1A  1  Walking for exercise  PAC_1M  13  Downhill skiing or snowboarding

PAC_1B  2  Gardening or yard work  PAC_1N  14  Bowling

PAC_1C  3  Swimming  PAC_1O  15  Baseball or softball

PAC_1D  4  Bicycling  PAC_1P  16  Tennis

PAC_1E  5  Popular or social dance  PAC_1Q  17  Weight-training

PAC_1F  6  Home exercises  PAC_1R  18  Fishing

PAC_1G  7  Ice hockey  PAC_1S  19  Volleyball

PAC_1H  8  Ice skating  PAC_1T  20  Basketball

PAC_1I  9  In-line skating or rollerblading  PAC_1U  21  Soccer

PAC_1J  10  Jogging or running  PAC_1V  22  Any other

PAC_1K  11  Golfing  PAC_1W  23  No physical activity

PAC_1L  12  Exercise class or aerobics

DK, R  (Go to PAC_END)

PAC_E1  If “No physical activity” is chosen in PAC_Q1 with any other response, show pop-up edit as follows.

You cannot select “No physical activity” and another category.

Please return and correct.

PAC_C1V  If PAC_C1=23 only, go to PAC_R7.

PAC_C1VS  If PAC_Q1 = 22, go to PAC_Q1VS.

Otherwise, go to PAC_Q2n.

PAC_Q1VS  What was this activity?

INTERVIEWER: Enter one activity only.

________________________

(80 spaces)

DK, R  (Go to PAC_C2)
Canadian Community Health Survey, 2008 Questionnaire, 101

PAC_Q1X  In the past 3 months, did you do any other physical activity for leisure?

1  Yes  (Go to PAC_Q2n)
2  No  (Go to PAC_Q2n)

DK, R  (Go to PAC_Q2n)

PAC_Q1XS  What was this activity?

INTERVIEWER: Enter one activity only.

________________________
(80 spaces)
DK, R  (Go to PAC_Q2n)

PAC_Q1Y  In the past 3 months, did you do any other physical activity for leisure?

PAC_1X  1  Yes  (Go to PAC_Q2n)
2  No  (Go to PAC_Q2n)

DK, R  (Go to PAC_Q2n)

PAC_Q1YS  What was this activity?

INTERVIEWER: Enter one activity only.

________________________
(80 spaces)
DK, R  (Go to PAC_Q2n)

PAC_C2  If PAC_Q1 = 22 only and PAC_Q1VS = DK, R, go to PAC_R7.
Otherwise, go to PAC_Q2n.

For each activity identified in PAC_Q1, ask PAC_Q2n and PAC_Q3n.

PAC_Q2n  In the past 3 months, how many times did you [participate in identified activity]?

| | | | Times
(MIN: 1) (MAX: 99 for each activity except the following:
  Walking: MAX = 270
  Bicycling: MAX = 200
  Other activities: MAX = 200)

DK, R  (Go to next activity)

PAC_Q3n  About how much time did you spend on each occasion?

1  1 to 15 minutes
2  16 to 30 minutes
3  31 to 60 minutes
4  More than one hour

DK, R

PAC_R7  The last questions were about leisure time activities. Next, some questions about walking and bicycling that you do only as a way of getting to and from work or school.

INTERVIEWER: Press <Enter> to continue.
[Other than the (X) times you already reported walking for exercise was there any other time / Was there any time] in the past 3 months when you walked to and from work or school?

1  Yes  
2  No  (Go to PAC_Q8)  
3  Does not work or go to school  (Go to PAC_END)  
   DK, R  (Go to PAC_Q8)

Note: (If PAC_Q2n > 0, where n = 1, X=PAC_Q2n, and use “Other than the (X) times you already reported walking for exercise was there any other time”). Otherwise use “Was there any time”.

How many times?

| | | | Times  
(MIN: 1) (MAX: 270)

DK, R (Go to PAC_Q8)

About how much time did you spend on each occasion?

INTERVIEWER: Include both walking to and from work and school, if both apply.

1  1 to 15 minutes  
2  16 to 30 minutes  
3  31 to 60 minutes  
4  More than one hour  
   DK, R  

[Other than the (X) times you already reported bicycling was there any other time / Was there any other time] in the past 3 months when you bicycled to and from work or school?

1  Yes  
2  No  (Go to PAC_END)  
   DK, R  (Go to PAC_END)

Note1: (If PAC_Q2n > 0, where n = 4, X=PAC_Q2n, and use “Other than the (X) times you already reported bicycling was there any other time”). Otherwise use “Was there any time”.

Note2: (If PAC_Q7 = 3, PAC_Q8 will be filled with “Does not work or go to school” in processing)

How many times?

| | | | Times  
(MIN: 1) (MAX: 200)

DK, R (Go to PAC_END)

About how much time did you spend on each occasion?

INTERVIEWER: Include both bicycling to and from work and school, if both apply.

1  1 to 15 minutes  
2  16 to 30 minutes  
3  31 to 60 minutes  
4  More than one hour  
   DK, R  

PAC_END
Sedentary activities (SAC)

SAC_BEG

SAC_C1A If (do SAC block = 1), go to SAC_C1B.
SACFOPT Otherwise, go to SAC_END.

SAC_C1B If proxy interview, go to SAC_END.
Otherwise, go to SAC_R1.

SAC_R1 Now, a few additional questions about activities you do in your leisure time, that is, activities not at work or at school.
INTERVIEWER: Press <Enter> to continue.

SAC_Q1 In a typical week in the past 3 months, how much time did you usually spend:

SAC_1 ... on a computer, including playing computer games and using the Internet?
INTERVIEWER: Do not include time spent at work or at school.

1 None
2 Less than 1 hour
3 From 1 to 2 hours
4 From 3 to 5 hours
5 From 6 to 10 hours
6 From 11 to 14 hours
7 From 15 to 20 hours
8 More than 20 hours
DK, R

(SAC_E1D)

SAC_C2 If age > 19, go to SAC_Q3.

SAC_Q2 (In a typical week, in the past 3 months, how much time did you usually spend:)

SAC_2 ... playing video games, such as XBOX, Nintendo and Playstation?

1 None
2 Less than 1 hour
3 From 1 to 2 hours
4 From 3 to 5 hours
5 From 6 to 10 hours
6 From 11 to 14 hours
7 From 15 to 20 hours
8 More than 20 hours
DK, R
### SAC_Q3
**In a typical week in the past 3 months, how much time did you usually spend:**

... watching television or videos?

<table>
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<tr>
<th></th>
<th>Description</th>
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<tbody>
<tr>
<td>1</td>
<td>None</td>
</tr>
<tr>
<td>2</td>
<td>Less than 1 hour</td>
</tr>
<tr>
<td>3</td>
<td>From 1 to 2 hours</td>
</tr>
<tr>
<td>4</td>
<td>From 3 to 5 hours</td>
</tr>
<tr>
<td>5</td>
<td>From 6 to 10 hours</td>
</tr>
<tr>
<td>6</td>
<td>From 11 to 14 hours</td>
</tr>
<tr>
<td>7</td>
<td>From 15 to 20 hours</td>
</tr>
<tr>
<td>8</td>
<td>More than 20 hours</td>
</tr>
</tbody>
</table>

DK, R

### SAC_Q4
**In a typical week, in the past 3 months, how much time did you usually spend:**

... reading, not counting at work or at school?

**INTERVIEWER:** Include books, magazines, newspapers, homework.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>None</td>
</tr>
<tr>
<td>2</td>
<td>Less than 1 hour</td>
</tr>
<tr>
<td>3</td>
<td>From 1 to 2 hours</td>
</tr>
<tr>
<td>4</td>
<td>From 3 to 5 hours</td>
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<tr>
<td>5</td>
<td>From 6 to 10 hours</td>
</tr>
<tr>
<td>6</td>
<td>From 11 to 14 hours</td>
</tr>
<tr>
<td>7</td>
<td>From 15 to 20 hours</td>
</tr>
<tr>
<td>8</td>
<td>More than 20 hours</td>
</tr>
</tbody>
</table>

DK, R

SAC_END
Use of protective equipment (UPE)

UPE_BEG

UPE_C1A If (do UPE block = 1), go to UPE_C1B.

UPE_C1B If proxy interview, go to UPE_END.
Otherwise, go to UPE_C1C.

UPE_C1C If PAC_Q1 = 4 (bicycling for leisure) or PAC_Q1 = 9 (in-line skating or rollerblading) or PAC_Q1 = 13 (downhill skiing or snowboarding), or (PAC_Q8 = 1 (bicycling to work or school)), go to UPE_R1.
Otherwise, go to UPE_C3A.

UPE_R1 Now a few questions about precautions you take while participating in physical activities.
INTERVIEWER: Press <Enter> to continue.

UPE_C1D If PAC_Q1 = 4 (bicycling for leisure) or (PAC_Q8 = 1 (bicycling to work or school)), go to UPE_Q1.
Otherwise, go to UPE_C2A.

UPE_Q1 When riding a bicycle, how often do you wear a helmet?
INTERVIEWER: Read categories to respondent.

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

UPE_C2A If PAC_Q1 = 9 (in-line skating or rollerblading), go to UPE_Q2A.
Otherwise, go to UPE_C3A.

UPE_Q2A When in-line skating or rollerblading, how often do you wear a helmet?

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

UPE_Q2B How often do you wear wrist guards or wrist protectors?

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

UPE_Q2C How often do you wear elbow pads?

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

UPE_C3A If PAC_Q1 = 13 (downhill skiing or snowboarding), go to UPE_Q3A.
Otherwise, go to UPE_Q3B.
UPE_Q3A Earlier, you mentioned going downhill skiing or snowboarding in the past 3 months. Was that:

INTERVIEWER: Read categories to respondent.

1 ... downhill skiing only? (Go to UPE_Q4A)
2 ... snowboarding only? (Go to UPE_C5A)
3 ... both? (Go to UPE_Q4A)
   DK, R (Go to UPE_C6)

UPE_Q3B In the past 12 months, did you do any downhill skiing or snowboarding?

INTERVIEWER: Read categories to respondent.

1 Downhill skiing only (Go to UPE_Q4A)
2 Snowboarding only (Go to UPE_C5A)
3 Both (Go to UPE_Q4A)
4 Neither (Go to UPE_Q4A)
   DK, R (Go to UPE_C6)

UPE_Q4A When downhill skiing, how often do you wear a helmet?

INTERVIEWER: Read categories to respondent.

1 Always
2 Most of the time
3 Rarely
4 Never
   DK, R

UPE_C5A If UPE_Q3A = 2 or 3 (snowboarding or both) or UPE_Q3B = 2 or 3, go to UPE_Q5A. Otherwise, go to UPE_C6.

UPE_Q5A When snowboarding, how often do you wear a helmet?

INTERVIEWER: Read categories to respondents.

1 Always
2 Most of the time
3 Rarely
4 Never
   DK, R

UPE_Q5B How often do you wear wrist guards or wrist protectors?

1 Always
2 Most of the time
3 Rarely
4 Never
   DK, R

UPE_C6 If age >= 12 or <=19, go to UPE_Q6. Otherwise, go to UPE_END.

UPE_Q6 In the past 12 months, have you done any skateboarding?

1 Yes
2 No (Go to UPE_END)
   DK, R (Go to UPE_END)
How often do you wear a helmet?

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

How often do you wear wrist guards or wrist protectors?

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

How often do you wear elbow pads?

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R
Sun safety behaviours (SSB)

SSB_BEG

If (do SSB block = 1), go to SSB_C2.

Otherwise, go to SSB_END.

SSBFOPT

If proxy interview, go to SSB_END.

Otherwise, go to SSB_R01.

SSB_R01

The next few questions are about exposure to the sun and sunburns. Sunburn is defined as any reddening or discomfort of the skin, that lasts longer than 12 hours after exposure to the sun or other UV sources, such as tanning beds or sun lamps.

INTERVIEWER: Press <Enter> to continue.

SSB_Q01

In the past 12 months, has any part of your body been sunburnt?

1  Yes
2  No  (Go to SSB_R06)
   DK, R  (Go to SSB_END)

SSB_Q02

Did any of your sunburns involve blistering?

1  Yes
2  No
   DK, R

SSB_Q03

Did any of your sunburns involve pain or discomfort that lasted for more than 1 day?

1  Yes
2  No
   DK, R

SSB_R06

For the next questions, think about a typical weekend, or day off from work or school in the summer months.

INTERVIEWER: Press <Enter> to continue.

SSB_Q06

About how much time each day do you spend in the sun between 11 am and 4 pm?

1  None  (Go to SSB_Q13)
2  Less than 30 minutes  (Go to SSB_Q13)
3  30 to 59 minutes
4  1 hour to less than 2 hours
5  2 hours to less than 3 hours
6  3 hours to less than 4 hours
7  4 hours to less than 5 hours
8  5 hours
   DK, R  (Go to SSB_Q13)
In the summer months, on a typical weekend or day off, when you are in the sun for 30 minutes or more, how often do you:

... seek shade?

INTERVIEWER: Read categories to respondent.

1 Always
2 Often
3 Sometimes
4 Rarely
5 Never

... wear a hat that shades your face, ears and neck?

1 Always
2 Often
3 Sometimes
4 Rarely
5 Never

... wear long pants or a long skirt to protect your skin from the sun?

1 Always
2 Often
3 Sometimes
4 Rarely
5 Never

... use sunscreen on your face?

1 Always
2 Often
3 Sometimes
4 Rarely (Go to SSB_Q11)
5 Never (Go to SSB_Q11)

What Sun Protection factor (SPF) do you usually use?

1 Less than 15
2 15 to 25
3 More than 25

DK, R
In the summer months, on a typical weekend or day off, when you are in the sun for 30 minutes or more, how often do you:

… use sunscreen on your body?

1  Always
2  Often
3  Sometimes
4  Rarely  (Go to SSB_Q13)
5  Never  (Go to SSB_Q13)
   DK, R  (Go to SSB_Q13)

What Sun Protection factor (SPF) do you usually use?

1  Less than 15
2  15 to 25
3  More than 25
   DK, R

Do you have skin cancer?

1  Yes
2  No   (Go to SSB_END)
   DK, R   (Go to SSB_END)

Inconsistent answers have been entered. The respondent reported having skin cancer but previously reported that he/she did not have cancer. Please confirm.

Trigger soft edit if SSB_Q13 =1 and CCC_Q131 = 2.

If SSB_Q13 = 1, go to SSB_Q15.
Otherwise, go to SSB_Q14.

Have you ever been diagnosed with skin cancer?

1  Yes
2  No   (Go to SSB_END)
   DK, R   (Go to SSB_END)

Inconsistent answers have been entered. The respondent reported having (ever) been diagnosed with skin cancer but previously reported that he/she had not ever been diagnosed cancer. Please confirm.

Trigger soft edit if SSB_Q14 =1 and CCC_Q132 = 2.

What type of skin cancer [do/did] you have?

1  Melanoma
2  Non-melanoma
   DK, R

Note: If SSB_Q13 = Yes, then use “do”.
Otherwise, use “did”.

SSB_END
Injuries (INJ) (REP)

INJ_BEG

INJ_C1 If (do INJ block = 1), go to REP_R1.
INJFDQ Otherwise, go to INJ_END.

Repetitive strain

REP_R1 This next section deals with repetitive strain injuries. By this we mean injuries caused by overuse or by repeating the same movement frequently. (For example, carpal tunnel syndrome, tennis elbow or tendonitis.)
INTERVIEWER: Press <Enter> to continue.

REP_Q1 In the past 12 months, that is, from [date one year ago] to yesterday, did ^YOU2 have any injuries due to repetitive strain which were serious enough to limit ^YOU1 normal activities?

1  Y e s  (Go to INJ_R1)
2  No  (Go to INJ_R1)
DK, R  (Go to INJ_R1)

REP_Q3 Thinking about the most serious repetitive strain, what part of the body was affected?

1  Head
2  Neck
3  Shoulder, upper arm
4  Elbow, lower arm
5  Wrist
6  Hand
7  Hip
8  Thigh
9  Knee, lower leg
10  Ankle, foot
11  Upper back or upper spine (excluding neck)
12  Lower back or lower spine
13  Chest (excluding back and spine)
14  Abdomen or pelvis (excluding back and spine)
DK, R

REP_Q4 What type of activity ^WERE ^YOU1 doing when ^YOU1 got this repetitive strain?
INTERVIEWER: Mark all that apply.

REP_4A 1  Sports or physical exercise (include school activities)
REP_4B 2  Leisure or hobby (include volunteering)
REP_4C 3  Working at a job or business (exclude travel to or from work)
REP_4D 4  Travel to or from work
REP_4E 5  Household chores, other unpaid work or education
REP_4E 6  Sleeping, eating, personal care
REP_4F 7  Other - Specify
DK, R

REP_C4S If REP_Q4 = 7, go to REP_Q4S.
Otherwise, go to INJ_R1.

REP_Q4S INTERVIEWER: Specify.

_________________________________________________________________
(80 spaces)
DK, R

Optional Content selected by health regions in:
Nova Scotia and British Columbia
Number of injuries and details of most serious injury

Note: If REP_Q1 = 1, use “other injuries” in INJ_R1. Otherwise, use “injuries” in INJ_R1.

INJ_R1 Now some questions about [other] injuries which occurred in the past 12 months, and were serious enough to limit ^YOUR2 normal activities. For example, a broken bone, a bad cut or burn, a sprain, or a poisoning.
INTERVIEWER: Press <Enter> to continue.

INJ_Q01 [Not counting repetitive strain injuries, in the past 12 months, / In the past 12 months.] that is, from [date one year ago] to yesterday, ^WERE ^YOU1 injured?

1  Yes
2  No  (Go to INJ_Q16)
   DK, R  (Go to INJ_END)

Note: If REP_Q1 = 1, use “Not counting repetitive strain injuries, in the past 12 months,” in INJ_Q01. Otherwise, use “In the past 12 months,” in INJ_Q01.

INJ_Q02 How many times ^WERE ^YOU1 injured?

| | Times
( MIN: 1 )  ( MAX: 30; warning after 6)
DK, R  (Go to INJ_END)

INJ_Q03 [Thinking about the most serious injury, in which month / In which month] did it happen?

1  January
2  February
3  March
4  April
5  May
6  June
7  July
8  August
9  September
10  October
11  November
12  December
DK, R  (Go to INJ_Q05)

Note: If INJ_Q02 = 1 (one injury), use “In which month” in INJ_Q03. Otherwise, use “Thinking about the most serious injury, in which month” in INJ_Q03.

INJ_Q04 If INJ_Q03 = C_MONTH, go to INJ_Q04. Otherwise, go to INJ_Q05.

INJ_Q04 Was that this year or last year?

1  This year
2  Last year
DK, R
INJ_05 What type of injury did YOU have?
For example, a broken bone or burn.

1. Multiple injuries
2. Broken or fractured bones
3. Burn, scald, chemical burn
4. Dislocation
5. Sprain or strain
6. Cut, puncture, animal or human bite (open wound)
7. Scrape, bruise, blister
8. Concussion or other brain injury (Go to INJ_Q08)
9. Poisoning (Go to INJ_Q08)
10. Injury to internal organs (Go to INJ_Q07)
11. Other - Specify

DK, R

INJ_Q05S If INJ_Q05 = 11, go to INJ_Q05S. Otherwise, go to INJ_Q06.

INJ_Q05S INTERVIEWER: Specify.

_________________________
(80 spaces)
DK, R

INJ_06 What part of the body was injured?

1. Multiple sites
2. Eyes
3. Head (excluding eyes)
4. Neck
5. Shoulder, upper arm
6. Elbow, lower arm
7. Wrist
8. Hand
9. Hip
10. Thigh
11. Knee, lower leg
12. Ankle, foot
13. Upper back or upper spine (excluding neck)
14. Lower back or lower spine
15. Chest (excluding back and spine)
16. Abdomen or pelvis (excluding back and spine)

DK, R

Go to INJ_Q08

INJ_Q07 What part of the body was injured?

1. Chest (within rib cage)
2. Abdomen or pelvis (below ribs)
3. Other - Specify

DK, R

INJ_C07S If INJ_Q07 = 3, go to INJ_Q07S. Otherwise, go to INJ_Q08.
INJ_Q07S  INTERVIEWER: Specify.

_________________________
(80 spaces)
DK, R

INJ_Q08  Where did the injury happen?
INJ_08  INTERVIEWER: If respondent says ‘At work’, probe for type of workplace.

1  In a home or its surrounding area
2  Residential institution
3  School, college, university (exclude sports areas)
4  Sports or athletics area of school, college, university
5  Other sports or athletics area (exclude school sports areas)
6  Other institution (e.g., church, hospital, theatre, civic building)
7  Street, highway, sidewalk
8  Commercial area (e.g., store, restaurant, office building, transport terminal)
9  Industrial or construction area
10 Farm (exclude farmhouse and its surrounding area)
11 Countryside, forest, lake, ocean, mountains, prairie, etc.
12 Other - Specify
DK, R

INJ_C08S  If INJ_Q08 = 12, go to INJ_Q08S. Otherwise, go to INJ_Q09.

INJ_Q08S  INTERVIEWER: Specify.

_________________________
(80 spaces)
DK, R

INJ_Q09  What type of activity ^WERE ^YOU1 doing when ^YOU1 ^WERE injured?
INJ_09

1  Sports or physical exercise (include school activities)
2  Leisure or hobby (include volunteering)
3  Working at a job or business (exclude travel to or from work)
4  Travel to or from work
5  Household chores, other unpaid work or education
6  Sleeping, eating, personal care
7  Other - Specify
DK, R

INJ_C09S  If INJ_Q09 = 7, go to INJ_Q09S. Otherwise, go to INJ_Q10.

INJ_Q09S  INTERVIEWER: Specify.

_________________________
(80 spaces)
DK, R

INJ_Q10  Was the injury the result of a fall?
INJ_10  INTERVIEWER: Select “No” for transportation accidents.

1  Yes
2  No  (Go to INJ_Q12)
DK, R  (Go to INJ_Q12)
How did YOU fall?

1. While skating, skiing, snowboarding, in-line skating or skateboarding
2. Going up or down stairs / steps (icy or not)
3. Slip, trip or stumble on ice or snow
4. Slip, trip or stumble on any other surface
5. From furniture (e.g., bed, chair)
6. From elevated position (e.g., ladder, tree)
7. Other - Specify

If INJ_Q11 = 7, go to INJ_Q11S. Otherwise, go to INJ_Q13.

INTERVIEWER: Specify.

(80 spaces)

DK, R

Go to INJ_Q13

What caused the injury?

1. Transportation accident
2. Accidentally bumped, pushed, bitten, etc. by person or animal
3. Accidentally struck or crushed by object(s)
4. Accidental contact with sharp object, tool or machine
5. Smoke, fire, flames
6. Accidental contact with hot object, liquid or gas
7. Extreme weather or natural disaster
8. Overexertion or strenuous movement
9. Physical assault
10. Other - Specify

If INJ_Q12 = 10, go to INJ_Q12S. Otherwise, go to INJ_Q13.

INTERVIEWER: Specify.

(80 spaces)

DK, R

Did YOU receive any medical attention for the injury from a health professional in the 48 hours following the injury?

1. Yes
2. No (Go to INJ_Q16)

(Go to INJ_Q16)
INJ_Q14  Where did ^YOU1 receive treatment?
INTERVIEWER: Mark all that apply.

INJ_14A  1  Doctor’s office
INJ_14B  2  Hospital emergency room
INJ_14C  3  Hospital outpatient clinic (e.g. day surgery, cancer)
INJ_14D  4  Walk-in clinic
INJ_14E  5  Appointment clinic
INJ_14F  6  Community health centre / CLSC
INJ_14G  7  At work
INJ_14H  8  At school
INJ_14I  9  At home
INJ_14J  10  Telephone consultation only
INJ_14K  11  Other - Specify
DK, R

INJ_C14S  If INJ_Q14 = 11, go to INJ_Q14S. Otherwise, go to INJ_Q15.

INJ_Q14S  INTERVIEWER: Specify.

_________________________
(80 spaces)
DK, R

INJ_Q15  ^WERE_C ^YOU1 admitted to a hospital overnight?
INJ_15
1  Yes
2  No
DK, R

INJ_E15  If INJ_Q15 = 1 and HCU_Q01BA = 2 (No), show pop-up message as follows:
Inconsistent answers have been entered. Please confirm.

INJ_Q16  Did ^YOU2 have any other injuries in the past 12 months that were treated by a health
professional, but did not limit ^YOUR1 normal activities?
INJ_16
1  Yes
2  No  (Go to INJ_END)
DK, R  (Go to INJ_END)

INJ_Q17  How many injuries?
INJ_17
| | | Injuries
(MIN: 1) (MAX: 30; warning after 6)
DK, R

INJ_END
Satisfaction with life (SWL)

SWL_C1 If (do SWL block = 2), go to SWL_END.
SWLFDO Otherwise, go to SWL_C2.

SWL_C2 If proxy interview, go to SWL_END.
Otherwise, go to SWL_R1.

SWL_R1 Now I'd like to ask about your satisfaction with various aspects of your life. For each question, please tell me whether you are very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied.
INTERVIEWER: Press <Enter> to continue.

SWL_Q02 How satisfied are you with your job or main activity?

1  Very satisfied
2  Satisfied
3  Neither satisfied nor dissatisfied
4  Dissatisfied
5  Very dissatisfied
DK
R  (Go to SWL_END)

SWL_Q03 How satisfied are you with your leisure activities?

1  Very satisfied
2  Satisfied
3  Neither satisfied nor dissatisfied
4  Dissatisfied
5  Very dissatisfied
DK, R

SWL_Q04 (How satisfied are you) with your financial situation?

1  Very satisfied
2  Satisfied
3  Neither satisfied nor dissatisfied
4  Dissatisfied
5  Very dissatisfied
DK, R

SWL_Q05 How satisfied are you with yourself?

1  Very satisfied
2  Satisfied
3  Neither satisfied nor dissatisfied
4  Dissatisfied
5  Very dissatisfied
DK, R

SWL_Q06 How satisfied are you with the way your body looks?

1  Very satisfied
2  Satisfied
3  Neither satisfied nor dissatisfied
4  Dissatisfied
5  Very dissatisfied
DK, R

Canadian Community Health Survey, 2008 Questionnaire, 117
How satisfied are you with your relationships with other family members?
1 Very satisfied
2 Satisfied
3 Neither satisfied nor dissatisfied
4 Dissatisfied
5 Very dissatisfied

(How satisfied are you) with your relationships with friends?
1 Very satisfied
2 Satisfied
3 Neither satisfied nor dissatisfied
4 Dissatisfied
5 Very dissatisfied

(How satisfied are you) with your housing?
1 Very satisfied
2 Satisfied
3 Neither satisfied nor dissatisfied
4 Dissatisfied
5 Very dissatisfied

(How satisfied are you) with your neighbourhood?
1 Very satisfied
2 Satisfied
3 Neither satisfied nor dissatisfied
4 Dissatisfied
5 Very dissatisfied

Canadian Community Health Survey, 2008 Questionnaire, 118
Stress - Sources (STS)

STS_BEG

STS_C1 If (do STS block = 1), go to STS_C2. 
STS_C2D Otherwise, go to STS_END.

STS_C2 If proxy interview, go to STS_END. Otherwise, go to STS_R1.

STS_R1 Now a few questions about the stress in your life. 
INTERVIEWER: Press <Enter> to continue.

STS_Q1 In general, how would you rate your ability to handle unexpected and difficult problems, for example, a family or personal crisis? Would you say your ability is: 
INTERVIEWER: Read categories to respondent.

1 … excellent?
2 … very good?
3 … good?
4 … fair?
5 … poor?
DK, R (Go to STS_END)

STS_Q2 In general, how would you rate your ability to handle the day-to-day demands in your life, for example, handling work, family and volunteer responsibilities? Would you say your ability is: 
INTERVIEWER: Read categories to respondent.

1 … excellent?
2 … very good?
3 … good?
4 … fair?
5 … poor?
DK, R

STS_Q3 Thinking about stress in your day-to-day life, what would you say is the most important thing contributing to feelings of stress you may have? 
INTERVIEWER: Do not probe.

1 Time pressures / not enough time
2 Own physical health problem or condition
3 Own emotional or mental health problem or condition
4 Financial situation (e.g., not enough money, debt)
5 Own work situation (e.g., hours of work, working conditions)
6 School
7 Employment status (e.g., unemployment)
8 Caring for - own children
9 Caring for - others
10 Other personal or family responsibilities
11 Personal relationships
12 Discrimination
13 Personal and family’s safety
14 Health of family members
15 Other - Specify
16 Nothing (Go to STS_END)
DK, R (Go to STS_END)

STS_C3S If STS_Q3 = 15, go to STS_Q3S. Otherwise, go to STS_END.
INTERVIEWER: Specify.

(80 spaces)

DK, R
Stress – Coping with stress (STC)

STC_BEG

STC_C1 If (do STC block = 1), go to STC_C2.
STCFOPT Otherwise, go to STR_END.

STC_C2 If proxy interview, go to STC_END.
Otherwise, go to STC_R1.

STC_R1 Now a few questions about coping with stress.
INTERVIEWER: Press <Enter> to continue.

STC_Q1_1 People have different ways of dealing with stress. Thinking about the ways you deal with stress, please tell me how often you do each of the following.

How often do you try to solve the problem?
INTERVIEWER: Read categories to respondent.

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R (Go to STC_END)

STC_Q1_2 To deal with stress, how often do you talk to others?

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R

STC_Q1_3 (When dealing with stress,) how often do you avoid being with people?

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R

STC_Q1_4 How often do you sleep more than usual to deal with stress?

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R

STC_Q1_5A When dealing with stress, how often do you try to feel better by eating more, or less, than usual?

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R
STC_5B  (When dealing with stress,) how often do you try to feel better by smoking more cigarettes than usual?
1  Often
2  Sometimes
3  Rarely
4  Never
5  Do not smoke
  DK, R

STC_5C  When dealing with stress, how often do you try to feel better by drinking alcohol?
1  Often
2  Sometimes
3  Rarely
4  Never
  DK, R

STC_5D  (When dealing with stress,) how often do you try to feel better by using drugs or medication?
1  Often
2  Sometimes
3  Rarely
4  Never
  DK, R

STC_6  How often do you jog or do other exercise to deal with stress?
1  Often
2  Sometimes
3  Rarely
4  Never
  DK, R

STC_7  How often do you pray or seek spiritual help to deal with stress?
1  Often
2  Sometimes
3  Rarely
4  Never
  DK, R

STC_8  (To deal with stress,) how often do you try to relax by doing something enjoyable?
1  Often
2  Sometimes
3  Rarely
4  Never
  DK, R

STC_9  (To deal with stress,) how often do you try to look on the bright side of things?
1  Often
2  Sometimes
3  Rarely
4  Never
  DK, R
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>STC_Q1_10</td>
<td>How often do you blame yourself?</td>
<td>1: Often, 2: Sometimes, 3: Rarely, 4: Never, DK, R</td>
</tr>
<tr>
<td>STC_Q1_11</td>
<td>To deal with stress, how often do you wish the situation would go away or somehow be finished?</td>
<td>1: Often, 2: Sometimes, 3: Rarely, 4: Never, DK, R</td>
</tr>
</tbody>
</table>
Stress - Recent life events (RLE)

RLE_BEG

RLE_C100 If (do RLE block = 1), go to RLE_C200.
RLEFDO Otherwise, go to RLE_END.

RLE_C200 If proxy interview or age < 18, go to RLE_END.
Otherwise, go to RLE_C201.

RLE_C201 If (do OGP block = 1), go to RLE_R2.
Otherwise, go to RLE_R1.

RLE_R1 The next part of the questionnaire deals with different kinds of stress. Although the questions may seem repetitive, they are related to various aspects of a person's physical, emotional and mental health.
INTERVIEWER: Press <Enter> to continue.

RLE_R2 I'd like to ask you about some things that may have happened in the past 12 months, that is, from [date one year ago] to yesterday. Some of these experiences happen to most people at one time or another, while some happen to only a few. First, I'd like to ask about yourself or anyone close to you (that is, your spouse or partner, children, relatives or close friends).
INTERVIEWER: Press <Enter> to continue.

RLE_Q201 In the past 12 months, was any one of you beaten up or physically attacked?

RLE_201

1  Yes
2  No
DK
R (Go to RLE_END)

RLE_Q202 Now I'd like you to think just about your family, that is, yourself and your spouse/partner or children, if any.

RLE_202 In the past 12 months, did [someone/you or someone] in your family, have an unwanted pregnancy?

RLE_Q203 (In the past 12 months,) did [someone/you or someone] in your family have an abortion or miscarriage?

RLE_203

1  Yes
2  No
DK, R

Note: If sex = female, use “you or someone” in RLE_Q202.
Otherwise, use “someone” in RLE_Q202.

Note: If sex = female, use “you or someone” in RLE_Q203.
Otherwise, use “someone” in RLE_Q203.
RLE_Q204  (In the past 12 months,) did you or someone in your family have a major financial crisis?

1  Yes
2  No
DK, R

RLE_Q205  (In the past 12 months,) did you or someone in your family fail school or a training program?

1  Yes
2  No
DK, R

RLE_Q206  Now I’d like you to think just about [yourself / yourself and your spouse or partner].

In the past 12 months, did you [you / you or your partner] experience a change of job for a worse one?

1  Yes
2  No
DK, R

Note: If marital status = married or living common-law, include the phrase “yourself and your spouse or partner” and “you or your partner” in RLE_Q206. Otherwise, use “yourself” and “you” in RLE_Q206.

RLE_Q207  (In the past 12 months,) were [you / you or your partner] demoted at work or did [you / either of you] take a cut in pay?

1  Yes
2  No
DK, R

Note: If marital status = married or living common-law, include the phrase “yourself or your partner” and “either of you” in RLE_Q207. Otherwise, use “yourself” and “you” in RLE_Q207.

RLE_Q208  If marital status = married or living common-law, ask RLE_Q208. Otherwise, go to RLE_Q209.

RLE_Q208  (In the past 12 months,) did you have increased arguments with your partner?

1  Yes
2  No
DK, R

RLE_Q209  [Now, just you personally, in / In] the past 12 months, did you go on welfare?

1  Yes
2  No
DK, R

Note: If marital status = married or living common-law, include the phrase “Now, just you personally, in” in RLE_Q209. Otherwise, use “In” in RLE_Q209.

RLE_C210  If OGP_Q109 = 1 (has children), go to RLE_Q211. Otherwise, go to RLE_C210A.

RLE_C210A  If (do OGP block) = 2, go to RLE_Q210. Otherwise, go to RLE_END.
### RLE_Q210 Do you have any children?

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<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<td></td>
<td>DK, R</td>
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</tbody>
</table>

### RLE_Q211 In the past 12 months, did you have a child move back into the house?

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<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>
Stress - Childhood and adult stressors (CST)

CST_BEG
If (do CST block = 1) go to CST_C2.
Otherwise, go to CST_END.

CST_C2
If proxy interview or age < 18, go to CST_END.
Otherwise, go to CST_R1.

CST_R1
The next few questions ask about some things that may have happened to you while you were a child or a teenager, before you moved out of the house.
Please tell me if any of these things have happened to you.
INTERVIEWER: Press <Enter> to continue.

CST_Q1
Did you spend 2 weeks or more in the hospital?

1  Y e s
2  N o
DK
R   (Go to CST_END)

CST_Q2
Did your parents get a divorce?

1  Y e s
2  N o
DK, R

CST_Q3
Did your father or mother not have a job for a long time when they wanted to be working?

1  Y e s
2  N o
DK, R

CST_Q4
Did something happen that scared you so much you thought about it for years after?

1  Y e s
2  N o
DK, R

CST_Q5
Were you sent away from home because you did something wrong?

1  Y e s
2  N o
DK, R

CST_Q6
Did either of your parents drink or use drugs so often that it caused problems for the family?

1  Y e s
2  N o
DK, R

Optional Content selected by health regions in:
Northwest Territories
**CST_Q7**

**CST_7**

*Were you ever physically abused by someone close to you?*

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>

**CST_END**
Stress - Work stress (WST)

WST_BEG
WST_C1 If (do WST block) = 1, go to WST_C2.
WSTFOPT Otherwise, go to WST_END.

WST_C2 If proxy interview, go to WST_END.
Otherwise, go to WST_C3.

WST_C3 If age < 15 or > 75, or GEN_Q08 = 2, go to WST_END.
Otherwise, go to WST_R4.

WST_R4 The next few questions are about your main job or business in the past 12 months. I'm going to read you a series of statements that might describe your job situation. Please tell me if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree.
INTERVIEWER: Press <Enter> to continue.

WST_Q401 Your job required that you learn new things.
WST_401
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R  (Go to WST_END)

WST_Q402 Your job required a high level of skill.
WST_402
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q403 Your job allowed you freedom to decide how you did your job.
WST_403
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q404 Your job required that you do things over and over.
WST_404
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R
WST_Q405  Your job was very hectic.
WST_405

1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q406  You were free from conflicting demands that others made.
WST_406

1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q407  Your job security was good.
WST_407

1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q408  Your job required a lot of physical effort.
WST_408

1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q409  You had a lot to say about what happened in your job.
WST_409

1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

WST_Q410  You were exposed to hostility or conflict from the people you worked with.
WST_410

1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R
WST_Q411 Your supervisor was helpful in getting the job done.
WST_411
1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R

WST_Q412 The people you worked with were helpful in getting the job done.
WST_412
1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R

WST_Q412A You had the materials and equipment you needed to do your job.
WST_12A
1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R

WST_Q413 How satisfied were you with your job?
WST_413 INTERVIEWER: Read categories to respondent:
1 Very satisfied
2 Somewhat satisfied
3 Not too satisfied
4 Not at all satisfied
DK, R

WST_END
Self-esteem (SFE)

SFE_BEG

SFE_C500A If (do SFE block = 1), go to SFE_C500B.
SFEFOPT Otherwise, go to SFE_END.

SFE_C500B If proxy interview, go to SFE_END.
Otherwise, go to SFE_R5.

SFE_R5 Now a series of statements that people might use to describe themselves.

Please tell me if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree.

INTERVIEWER: Press <Enter> to continue.

SFE_Q501 You feel that you have a number of good qualities.
SFE_501

1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R (Go to SFE_END)

SFE_Q502 You feel that you're a person of worth at least equal to others.
SFE_502

1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R

SFE_Q503 You are able to do things as well as most other people.
SFE_503

1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R

SFE_Q504 You take a positive attitude toward yourself.
SFE_504

1 Strongly agree
2 Agree
3 Neither agree nor disagree
4 Disagree
5 Strongly disagree
DK, R
**SFE_Q505**  
**On the whole you are satisfied with yourself.**

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

**SFE_Q506**  
**All in all, you're inclined to feel you're a failure.**

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

SFE_END
Mastery (MAS)

MAS_BEG

MAS_C600A If (do MAS block = 1), go to MAS_C600B.
MASFDO Otherwise, go to MAS_END.

MAS_C600B If proxy interview, go to MAS_END.
Otherwise, go to MAS_C600C.

MAS_C600C If (do SFE block = 1), go to MAS_Q601.
Otherwise, go to MAS_R6.

MAS_R6 Now a series of statements that people might use to describe themselves. Please tell me if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree.
INTERVIEWER: Press <Enter> to continue.

MAS_Q601 You have little control over the things that happen to you.

MAS_601
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK
R  (Go to MAS_END)

MAS_Q602 There is really no way you can solve some of the problems you have.

MAS_602
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

MAS_Q603 There is little you can do to change many of the important things in your life.

MAS_603
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

MAS_Q604 You often feel helpless in dealing with problems of life.

MAS_604
1  Strongly agree
2  Agree
3  Neither agree nor disagree
4  Disagree
5  Strongly disagree
DK, R

Optional Content selected by health regions in: Manitoba
Sometimes you feel that you are being pushed around in life.

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

What happens to you in the future mostly depends on you.

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

You can do just about anything you really set your mind to.

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

DK, R
Smoking (SMK)

SMK_BEG

SMK_C1 If (do SMK block = 2), go to SMK_END.
Otherwise, go to SMK_R1.

SMKFDO

SMK_R1 The next questions are about smoking.
INTERVIEWER: Press <Enter> to continue.

SMK_Q201A In [your/his/her] lifetime, [have/has] [you/FNAME] smoked a total of 100 or more cigarettes (about 4 packs)?
1 Yes (Go to SMK_Q201C)
2 No
   DK, R

SMK_Q201B [Have/Has] [you/he/she] ever smoked a whole cigarette?
1 Yes (Go to SMK_Q201C)
2 No (Go to SMK_Q202)
   DK (Go to SMK_Q202)
   R

SMK_C201C If SMK_Q201A = R and SMK_Q201B = R, go to SMK_END.
Otherwise, go to SMK_Q202.

SMK_Q201C At what age did [you/he/she] smoke [your/his/her] first whole cigarette?
INTERVIEWER: Minimum is 5; maximum is [current age].

| | | | Age in years
(MIN: 5) (MAX: current age)
DK, R (Go to SMK_Q202)

SMK_E201C If SMK_Q201C >= 5 and SMK_Q201C <= current age, go to SMK_Q202.
Otherwise, show pop-up edit as follows.

The entered age at which the respondent first smoked a whole cigarette is invalid. Please return and correct.

SMK_Q202 At the present time, [do/does] [you/FNAME] smoke cigarettes daily, occasionally or not at all?
1 Daily
2 Occasionally (Go to SMK_Q205B)
3 Not at all (Go to SMK_C205D)
   DK, R (Go to SMK_END)

Daily smoker (current)

SMK_Q203 At what age did [you/he/she] begin to smoke cigarettes daily?
INTERVIEWER: Minimum is 5; maximum is [current age].

| | | | Age in years
(MIN: 5) (MAX: current age)
DK, R (Go to SMK_Q204)
SMK_E203  If SMK_Q203 >= 5 and SMK_Q203 <= current age, go to SMK_Q204. Otherwise, show pop-up edit as follows.

The entered age at which the respondent first began to smoke cigarettes daily is invalid. Please return and correct.

SMK_Q204  How many cigarettes [do/does] [you/he/she] smoke each day now?

SMK_204

| | | Cigarettes
(MIN: 1)  (MAX: 99; warning after 60)
DK, R

Go to SMK_END

Occasional smoker (current)

SMK_Q205B  On the days that [you/FNAME] [do/does] smoke, how many cigarettes [do/does] [you/he/she] usually smoke?

SMK_05B

| | | Cigarettes
(MIN: 1)  (MAX: 99; warning after 60)
DK, R

SMK_Q205C  In the past month, on how many days [have/has] [you/he/she] smoked 1 or more cigarettes?

SMK_05C

| | | Days
(MIN: 0)  (MAX: 30)
DK, R

SMK_C205D  If SMK_Q201A <> 1 (has not smoked 100 or more cigarettes lifetime), go to SMK_END. Otherwise, go to SMK_Q205D.

Occasional smoker or non-smoker (current)

SMK_Q205D  [Have/Has] [you/he/she] ever smoked cigarettes daily?

SMK_05D

1  Yes (Go to SMK_Q207)

2  No (Go to SMK_END)

SMK_C206A  If SMK_Q202 = 2 (current occasional smoker), go to SMK_END.

Non-smoker (current)

SMK_Q206A  When did [you/he/she] stop smoking? Was it:

SMK_06A

INTERVIEWER: Read categories to respondent.

1  ... less than one year ago?

2  ... 1 year to less than 2 years ago?  (Go to SMK_END)

3  ... 2 years to less than 3 years ago?  (Go to SMK_END)

4  ... 3 or more years ago?  (Go to SMK_Q206C)

DK, R  (Go to SMK_END)
In what month did [you/he/she] stop?

2. February 8. August
3. March 9. September
4. April 10. October
5. May 11. November
6. June 12. December

How many years ago was it?

INTERVIEWER: Minimum is 3; maximum is [current age - 5].

The number of years ago that the respondent stopped smoking is invalid. Please return and correct.

At what age did [you/he/she] begin to smoke (cigarettes) daily?

INTERVIEWER: Minimum is 5; maximum is [current age].

The entered age at which the respondent first began to smoke cigarettes daily is invalid. Please return and correct.

How many cigarettes did [you/he/she] usually smoke each day?

The number of cigarettes smoked daily is invalid. Please return and correct.

When did [you/he/she] stop smoking daily? Was it:

1. ... less than one year ago?
2. ... 1 year to less than 2 years ago? (Go to SMK_C210)
3. ... 2 years to less than 3 years ago? (Go to SMK_C210)
4. ... 3 or more years ago? (Go to SMK_Q209C)
   DK, R (Go to SMK_END)
In what month did [you/he/she] stop?

1. January
2. February
3. March
4. April
5. May
6. June
7. July
8. August
9. September
10. October
11. November
12. December

Go to SMK_C210

How many years ago was it?

INTERVIEWER: Minimum is 3; maximum is [current age-5].

[ ] [ ] [ ] Years
(MIN: 3) (MAX: current age-5)
DK, R (Go to SMK_C210)

If SMK_Q209C >= 3 and SMK_Q209C <= current age-5, go to SMK_E209D. Otherwise, show pop-up edit as follows.

The number of years ago that the respondent stopped smoking daily is invalid. Please return and correct.

If SMK_Q207 <= (current age - SMK_Q209C), go to SMK_C210. Otherwise, show pop-up edit as follows.

The number of years ago that the respondent stopped smoking daily is invalid. Please return and correct.

If SMK_Q202 = 2 (current occasional smoker), go to SMK_END.

Was that when [you/he/she] completely quit smoking?

1. Yes (Go to SMK_END)
2. No (Go to SMK_END)

When did [you/he/she] stop smoking completely? Was it:

INTERVIEWER: Read categories to respondent.

1. ... less than one year ago?
2. ... 1 year to less than 2 years ago? (Go to SMK_END)
3. ... 2 years to less than 3 years ago? (Go to SMK_END)
4. ... 3 or more years ago? (Go to SMK_Q210C)

When did [you/he/she] stop smoking completely? Was it:

INTERVIEWER: Read categories to respondent.

DK, R (Go to SMK_END)

In what month did [you/he/she] stop?

1. January
2. February
3. March
4. April
5. May
6. June
7. July
8. August
9. September
10. October
11. November
12. December

Go to SMK_END
**SMK_Q210C**  **How many years ago was it?**
**INTERVIEWER:** Minimum is 3; maximum is [current age-5].

| | | | Years  
(MIN: 3) (MAX: current age-5)
DK, R  (Go to SMK_END)

**SMK_E210C**  If SMK_Q210C >= 3 and SMK_Q210C <= current age-5, go to SMK_END. Otherwise, show pop-up edit as follows.

*The number of years ago that the respondent completely stopped smoking is invalid. Please return and correct.*

**SMK_END**
Smoking – Stages of change (SCH)

SCH_BEG

If (do SCH block = 2), go to SCH_END.
Otherwise, go to SCH_C2.

SCH_C2

If SMK_Q202 = 1 or 2 (current daily or occasional smokers), go to SCH_C3.
Otherwise, go to SCH_END.

SCH_C3

If proxy interview, go to SCH_END.
Otherwise, go to SCH_Q1 SCH_1.

SCH_Q1

Are you seriously considering quitting smoking within the next 6 months?

SCH_1

1 Yes
2 No (Go to SCH_Q3)
DK, R (Go to SCH_Q3)

SCH_Q2

Are you seriously considering quitting within the next 30 days?

SCH_2

1 Yes
2 No
DK, R

SCH_Q3

In the past 12 months, did you stop smoking for at least 24 hours because you were trying to quit?

SCH_3

1 Yes
2 No (Go to SCH_END)
DK, R (Go to SCH_END)

SCH_Q4

How many times? (in the past 12 months, did you stop smoking for at least 24 hours because you were trying to quit)

SCH_4

| | | | Times
(MIN: 1) (MAX: 95; warning after 48)
DK, R

SCH_END

Optional Content selected by health regions in: Ontario
Smoking - Nicotine dependence (NDE)

NDE_BEG

NDE_C1 If (do NDE block = 2), go to NDE_END.
NDE_DDO Otherwise, go to NDE_C2.

NDE_C2 If SMK_Q202 = 1 (current daily smokers), go to NDE_C3.
Otherwise, go to NDE_END.

NDE_C3 If proxy interview, go to NDE_END.
Otherwise, go to NDE_Q1.

NDE_Q1 How soon after you wake up do you smoke your first cigarette?
NDE_1

1 Within 5 minutes
2 6 - 30 minutes after waking
3 31 - 60 minutes after waking
4 More than 60 minutes after waking
DK, R (Go to NDE_END)

NDE_Q2 Do you find it difficult to refrain from smoking in places where it is forbidden?
NDE_2

1 Yes
2 No
DK, R

NDE_Q3 Which cigarette would you most hate to give up?
INTERVIEWER: Read categories to respondent.
NDE_3

1 The first one of the day
2 Another one
DK, R

NDE_Q4 Do you smoke more frequently during the first hours after waking, compared with the rest of the day?
NDE_4

1 Yes
2 No
DK, R

NDE_Q5 Do you smoke even if you are so ill that you are in bed most of the day?
NDE_5

1 Yes
2 No
DK, R

NDE_END
Smoking cessation methods (SCA)

SCA_BEG
If (do SCA block = 1), go to SCA_C10A.
Otherwise, go to SCA_END.

SCA_C1 If proxy interview, go to SCA_END.
Otherwise, go to SCA_C10B.

SCA_C10B If SMK_Q202 = 1 or 2 (current daily or occasional smoker), go to SCA_C50.
Otherwise, go to SCA_C10C.

SCA_C10C If SMK_Q206A = 1 or SMK_Q209A = 1 (former smoker who quit less than 1 year ago), go to SCA_Q10.
Otherwise, go to SCA_END.

SCA Q10

In the past 12 months, did you try a nicotine patch to quit smoking?

1  Yes
2  No (Go to SCA_Q11)
   DK, R (Go to SCA_END)

SCA Q10A

How useful was that in helping you quit?

1 Very useful
2 Somewhat useful
3 Not very useful
4 Not useful at all
   DK, R

SCA Q11

Did you try Nicorettes or other nicotine gum or candy to quit smoking? (In the past 12 months)

1  Yes
2  No (Go to SCA_Q12)
   DK, R (Go to SCA_Q12)

SCA Q11A

How useful was that in helping you quit?

1 Very useful
2 Somewhat useful
3 Not very useful
4 Not useful at all
   DK, R

SCA Q12

In the past 12 months, did you try medication such as Zyban, Prolev or Wellbutrin to quit smoking?

1  Yes
2  No (Go to SCA_END)
   DK, R (Go to SCA_END)
SCA_Q12A
SCA_12A
How useful was that in helping you quit?

1 Very useful  
2 Somewhat useful  
3 Not very useful  
4 Not useful at all  
DK, R

Go to SCA_END

SCA_C50
If (do SCH block = 2), go to SCA_Q50.  
Otherwise, go to SCA_C50A.

SCA_C50A
If SCH_Q3 = 1, go to SCA_Q60.  
Otherwise, go to SCA_END.

SCA_Q50
In the past 12 months, did you stop smoking for at least 24 hours because you were trying to quit?

1 Yes  
2 No (Go to SCA_END)  
DK, R (Go to SCA_END)

Note: In processing, if a respondent answered SCH_Q3 = 1, the variable SCA_Q50 is given the value of 1.

SCA_Q60
In the past 12 months, did you try any of the following to quit smoking:

… a nicotine patch?

1 Yes  
2 No  
DK, R

SCA_Q61
(In the past 12 months, did you try any of the following to quit smoking:)

… Nicorettes or other nicotine gum or candy?

1 Yes  
2 No  
DK, R

SCA_Q62
(In the past 12 months, did you try any of the following to quit smoking:)

… medication such as Zyban, Prolev or Wellbutrin?

1 Yes  
2 No  
DK, R

SCA_END
Smoking – Physician counselling (SPC)

SPC_BEG

SPC_C1 If (do SPC block = 1), go to SPC_C2.
SPCFOPT Otherwise, go to SPC_END.

SPC_C2 If proxy interview, go to SPC_END.
Otherwise, go to SPC_C3.

SPC_C3 If SMK_Q202 = 1 or 2 or SMK_Q206A = 1 or SMK_Q209A = 1, go to SPC_C4.
Otherwise, go to SPC_END.

SPC_C4 If (do HCU block = 1) and (HCU_Q01AA = 1) (i.e. has a regular medical doctor), go to SPC_Q10.
Otherwise, go to SPC_C20A.

SPC_Q10 Earlier, you mentioned having a regular medical doctor. In the past 12 months, did you go see this doctor?

1  Yes
2  No (Go to SPC_C20A)
DK, R (Go to SPC_C20A)

SPC_Q11 Does your doctor know that you [smoke/smoked] cigarettes?

1  Yes
2  No (Go to SPC_C20A)
DK, R (Go to SPC_C20A)

Note: If SMK_Q202 = 1 or 2, use “smoke”. If SMK_Q206A = 1 or SMK_Q209A = 1, use “smoked”.

SPC_Q12 In the past 12 months, did your doctor advise you to quit smoking?

1  Yes
2  No
DK, R (Go to SPC_C20A)

SPC_Q13 (In the past 12 months,) did your doctor give you any specific help or information to quit smoking?

1  Yes
2  No
DK, R (Go to SPC_C20A)

SPC_Q14 What type of help did the doctor give?

INTERVIEWER: Mark all that apply.

SPC_14A 1  Referral to a one-on-one cessation program
SPC_14B 2  Referral to a group cessation program
SPC_14C 3  Recommended use of nicotine patch or nicotine gum
SPC_14D 4  Recommended Zyban or other medication
SPC_14E 5  Provided self-help information (e.g., pamphlet, referral to website)
SPC_14F 6  Own doctor offered counselling
SPC_14G 7  Other
DK, R

SPC_C20A If (do DEN block = 1) and (DEN_Q130 = 1 or DEN_Q132 = 1) (visited dentist in past 12 months), go to SPC_Q21.
SPC_C20B  If (do DEN block = 1) and (DEN_Q130 = 2, DK or R) (did not visit dentist in past 
12 months), go to SPC_END. 
Otherwise, go to SPC_C20C.

SPC_C20C  If (do HCU block = 1) and (HCU_Q02E = 1) (saw or talked to dentist in past 12 months), go to 
SPC_Q20. 
Otherwise, go to SPC_END.

SPC_Q20
SPC_20
Earlier, you mentioned having “seen or talked to” a dentist in the past 12 months. 
Did you actually go to the dentist? 
INTERVIEWER: Include both face to face and telephone contacts.

1  Yes
2  No   (Go to SPC_END) 
      DK, R   (Go to SPC_END)

SPC_Q21
SPC_21
Does your dentist or dental hygienist know that you [smoke/smoked] cigarettes?

1  Yes
2  No   (Go to SPC_END) 
      DK, R   (Go to SPC_END)

Note: If SMK_Q202 = 1 or 2, use “smoke”. If SMK_Q206A = 1 or SMK_Q209A = 1, use “smoked”.

SPC_Q22
SPC_22
In the past 12 months, did the dentist or hygienist advise you to quit smoking?

1  Yes
2  No
      DK, R
Smoking - Youth smoking (YSM)

YSM_BEG

YSM_C1 If (do YSM block = 2), go to YSM_END.
Otherwise, go to YSM_C1A.

YSMFDO

YSM_C1A If proxy interview or age greater than 19, go to YSM_END.
Otherwise, go to YSM_C1B.

YSM_C1B If SMK_Q202 = 1 or 2 (current daily or occasional smoker), go to YSM_Q1.
Otherwise, go to YSM_END.

YSM_Q1 Where do you usually get your cigarettes?

YSM_1

1 Buy from - Vending machine
2 Buy from - Small grocery / corner store
3 Buy from - Supermarket
4 Buy from - Drug store
5 Buy from - Gas station
6 Buy from - Other store
7 Buy from - Friend or someone else
8 Given them by - Brother or sister
9 Given them by - Mother or father
10 Given them by - Friend or someone else
11 Take them from - Mother, father or sibling
12 Other
   DK, R (Go to YSM_END)

YSM_C2 If YSM_Q1 = 1, 2, 3, 4, 5, 6 or 7, go to YSM_Q3.
Otherwise, go to YSM_Q2.

YSM_Q2 In the past 12 months, have you bought cigarettes for yourself or for someone else?

YSM_2

1 Yes
2 No (Go to YSM_Q5)
   DK, R (Go to YSM_Q5)

YSM_Q3 In the past 12 months, have you been asked your age when buying cigarettes in a store?

YSM_3

1 Yes
2 No
   DK, R

YSM_Q4 In the past 12 months, has anyone in a store refused to sell you cigarettes?

YSM_4

1 Yes
2 No
   DK, R

YSM_Q5 In the past 12 months, have you asked a stranger to buy you cigarettes?

YSM_5

1 Yes
2 No
   DK, R

YSM_END

Optional Content selected by health regions in: British Columbia
Exposure to second-hand smoke (ETS)

ETS_BEG

ETS_C1 If (do ETS block = 2), go to ETS_END.

ETSFD0 Otherwise, go to ETS_R1.

ETS_R1 The next questions are about exposure to second-hand smoke.

INTERVIEWER: Press <Enter> to continue.

ETS_C10 If the number of household members = 1 and (SMK_Q202 = 1 or 2), go to ETS_Q30.

Otherwise, go to ETS_Q10.

ETS_Q10 Including both household members and regular visitors, does anyone smoke inside your home, every day or almost every day?

INTERVIEWER: Include cigarettes, cigars and pipes.

1 Yes
2 No (Go to ETS_C20)
DK, R (Go to ETS_END)

ETS_Q11 How many people smoke inside your home every day or almost every day?

INTERVIEWER: Include household members and regular visitors.

I_I_I Number of people
(MIN:1) (MAX:15)
DK, R

ETS_C20 If SMK_Q202 = 1 or 2 (current daily or occasional smoker), go to ETS_Q30.

Otherwise, go to ETS_Q20.

ETS_Q20 In the past month, [were/was] [your NAME] exposed to second-hand smoke, every day or almost every day, in a car or other private vehicle?

1 Yes
2 No
DK, R

ETS_Q20B (In the past month) [were/was] [you/he/she] exposed to second-hand smoke, every day or almost every day, in public places (such as bars, restaurants, shopping malls, arenas, bingo halls, bowling alleys)?

1 Yes
2 No
DK, R

ETS_Q30 Are there any restrictions against smoking cigarettes in your home?

1 Yes
2 No (Go to ETS_END)
DK, R (Go to ETS_END)
How is smoking restricted in your home?

INTERVIEWER: Read categories to respondent. Mark all that apply.

| ETS_6A  | 1 | Smokers are asked to refrain from smoking in the house |
| ETS_6B  | 2 | Smoking is allowed in certain rooms only |
| ETS_6C  | 3 | Smoking is restricted in the presence of young children |
| ETS_6D  | 4 | Other restriction |

DK, R
Smoking - Other tobacco products (TAL)

TAL_BEG

TAL_C1 If (do TAL block = 1), go to TAL_Q1. Otherwise, go to TAL_END.

TAL_Q1 Now I'd like to ask about [your/his/her] use of tobacco other than cigarettes.

TAL_1 In the past month, [have/has] [you/he/she] smoked cigars?

1  Yes
2  No
DK, R (Go to TAL_END)

TAL_Q2 (In the past month,) [have/has] [you/he/she] smoked a pipe?

TAL_2

1  Yes
2  No
DK, R

TAL_Q3 (In the past month,) [have/has] [you/he/she] used snuff?

TAL_3

1  Yes
2  No
DK, R

TAL_Q4 (In the past month,) [have/has] [you/he/she] used chewing tobacco?

TAL_4

1  Yes
2  No
DK, R

TAL_END

Optional Content selected by health regions in:
Ontario, and Alberta
Alcohol use (ALC)

ALC_BEG

ALC_C1A If (do ALC block = 1), go to ALC_R1. Otherwise, go to ALC_END.

ALC_R1 Now, some questions about ^YOUR2 alcohol consumption. When we use the word ‘drink’ it means:
- one bottle or can of beer or a glass of draft
- one glass of wine or a wine cooler
- one drink or cocktail with 1 and a 1/2 ounces of liquor.
INTERVIEWER: Press <Enter> to continue.

ALC_Q1 During the past 12 months, that is, from [date one year ago] to yesterday, ^HAVE ^YOU2 had a drink of beer, wine, liquor or any other alcoholic beverage?

  1  Yes
  2  No (Go to ALC_END)
      DK, R (Go to ALC_END)

ALC_Q2 During the past 12 months, how often did ^YOU1 drink alcoholic beverages?

  1  Less than once a month
  2  Once a month
  3  2 to 3 times a month
  4  Once a week
  5  2 to 3 times a week
  6  4 to 6 times a week
  7  Every day
      DK, R

ALC_Q3 How often in the past 12 months ^HAVE ^YOU1 had 5 or more drinks on one occasion?

  1  Never
  2  Less than once a month
  3  Once a month
  4  2 to 3 times a month
  5  Once a week
  6  More than once a week
      DK, R

ALC_END
Alcohol use during the past week (ALW)

ALW_BEG

ALW_C1 If (do ALW block = 1), go to ALW_C2.
Otherwise, go to ALW_END.

ALW_C2 If ALC_Q1 = No, DK or R, go to ALW_END.
Otherwise, go to ALW_Q5.

ALW_Q5 Thinking back over the past week, that is, from [date last week] to yesterday, did YOU have a drink of beer, wine, liquor or any other alcoholic beverage?

1  Yes
2  No  (Go to ALW_END)
DK, R  (Go to ALW_END)

ALW_D5A Yesterday = WEEKDAY(TODAY - 1)
IF Yesterday = 1 THEN
  DayE[1] = 'Sunday'
  DayE[2] = 'Saturday'
  DayE[3] = 'Friday'
  DayE[4] = 'Thursday'
  DayE[5] = 'Wednesday'
  DayE[6] = 'Tuesday'
  DayE[7] = 'Monday'
ELSEIF Yesterday = 2 THEN
  DayE[1] = 'Monday'
  DayE[2] = 'Sunday'
  DayE[3] = 'Saturday'
  DayE[4] = 'Friday'
  DayE[5] = 'Thursday'
  DayE[6] = 'Wednesday'
  DayE[7] = 'Tuesday'
ELSEIF Yesterday = 3 THEN
  DayE[1] = 'Tuesday'
  DayE[2] = 'Monday'
  DayE[3] = 'Sunday'
  DayE[4] = 'Saturday'
  DayE[5] = 'Friday'
  DayE[6] = 'Thursday'
  DayE[7] = 'Wednesday'
ELSEIF Yesterday = 4 THEN
  DayE[1] = 'Wednesday'
  DayE[2] = 'Tuesday'
  DayE[3] = 'Monday'
  DayE[4] = 'Sunday'
  DayE[5] = 'Saturday'
  DayE[6] = 'Friday'
  DayE[7] = 'Thursday'

Optional Content selected by health regions in:
Newfoundland and Labrador, Nova Scotia,
Ontario, British Columbia and Nunavut
ELSEIF Yesterday = 5 THEN
  DayE[1] = 'Thursday'
  DayE[2] = 'Wednesday'
  DayE[3] = 'Tuesday'
  DayE[4] = 'Monday'
  DayE[5] = 'Sunday'
  DayE[6] = 'Saturday'
  DayE[7] = 'Friday'
ELSEIF Yesterday = 6 THEN
  DayE[1] = 'Friday'
  DayE[2] = 'Thursday'
  DayE[3] = 'Wednesday'
  DayE[4] = 'Tuesday'
  DayE[5] = 'Monday'
  DayE[6] = 'Sunday'
  DayE[7] = 'Saturday'
ELSEIF Yesterday = 7 THEN
  DayE[1] = 'Saturday'
  DayE[2] = 'Friday'
  DayE[3] = 'Thursday'
  DayE[4] = 'Wednesday'
  DayE[5] = 'Tuesday'
  DayE[6] = 'Monday'
  DayE[7] = 'Sunday'
ENDIF

ALW_Q5A1
Starting with yesterday, that is ^DayE[1], how many drinks did ^YOU2 have?

I_I_I  Number of drinks
(MIN: 0  MAX: 99)
DK
R     (Go to ALW_END)

ALW_E5A1A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on
one occasion in the past 12 months but had 5 drinks on ^DayE[1].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A1 => 5.

ALW_E5A1B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A1 > 12.

ALW_Q5A2 (How many drinks did ^YOU1 have:) on ^DayE[2]?

I_I_I  Number of drinks
(MIN: 0  MAX: 99)
DK, R

ALW_E5A2A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on
one occasion in the past 12 months but had 5 drinks on ^DayE[2].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A2 => 5.

ALW_E5A2B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A2 > 12.
Canadian Community Health Survey, 2008 Questionnaire, 154

ALW_Q5A3 (How many drinks did ^YOU1 have:) … on ^DayE[3]?

I I I Number of drinks
(MIN: 0  MAX: 99)
DK, R

ALW_E5A3A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on one occasion in the past 12 months but had 5 drinks on ^DayE[3].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A3 => 5.

ALW_E5A3B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A3 > 12.

ALW_Q5A4 (How many drinks did ^YOU1 have:) … on ^DayE[4]?

I I I Number of drinks
(MIN: 0  MAX: 99)
DK, R

ALW_E5A4A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on one occasion in the past 12 months but had 5 drinks on ^DayE[4].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A4 => 5.

ALW_E5A4B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A4 > 12.

ALW_Q5A5 (How many drinks did ^YOU1 have:) … on ^DayE[5]?

I I I Number of drinks
(MIN: 0  MAX: 99)
DK, R

ALW_E5A5A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on one occasion in the past 12 months but had 5 drinks on ^DayE[5].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A5 => 5.

ALW_E5A5B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A5 > 12.

ALW_Q5A6 (How many drinks did ^YOU1 have:) … on ^DayE[6]?

I I I Number of drinks
(MIN: 0  MAX: 99)
DK, R

ALW_E5A6A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on one occasion in the past 12 months but had 5 drinks on ^DayE[6].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A6 => 5.
ALW_E5A6B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A6 > 12.

ALW_Q5A7 (How many drinks did ^YOU1 have:)
ALW_2A7 … on ^DayE[7]?

I I I Number of drinks
(MIN: 0 MAX: 99)
DK, R

ALW_E5A7A Inconsistent answers have been entered. The respondent has not had 5 or more drinks on one occasion in the past 12 months but had 5 drinks on ^DayE[7].

Trigger hard edit if ALC_Q3 = 1 and ALW_Q5A7 => 5.

ALW_E5A7B An unusual value has been entered. Please confirm.

Note: Trigger soft edit if ALW_Q5A7 > 12.

ALW_E5A1 Inconsistent answers have been entered. The respondent had a drink in the past week but has not had any drinks in the last seven days.

Trigger hard edit if ALW_Q5A1 to ALW_Q5A7 all = 0.

ALW_END
Alcohol use – Former drinkers (ALN)

ALN_BEG

ALN_C1 If (do ALN block = 1), go to ALN_C2. Otherwise, go to ALN_END.

ALN_C2 If ALC_Q1 = Yes, DK or R, go to ALN_END. Otherwise, go to ALN_Q5B.

ALN_Q5B

^HAVE_C ^YOU2 ever had a drink?

ALN_1

1 Yes
2 No (Go to ALN_END)
DK, R (Go to ALN_END)

ALN_Q6 Did ^YOU1 ever regularly drink more than 12 drinks a week?

ALN_2

1 Yes
2 No (Go to ALN_END)
DK, R (Go to ALN_END)

ALN_Q7 Why did ^YOU1 reduce or quit drinking altogether?

INTERVIEWER: Mark all that apply.

ALN_3A 1 Dieting
ALN_3B 2 Athletic training
ALN_3C 3 Pregnancy
ALN_3D 4 Getting older
ALN_3E 5 Drinking too much / drinking problem
ALN_3F 6 Affected - work, studies, employment opportunities
ALN_3G 7 Interfered with family or home life
ALN_3H 8 Affected - physical health
ALN_3I 9 Affected - friendships or social relationships
ALN_3J 10 Affected - financial position
ALN_3K 11 Affected - outlook on life, happiness
ALN_3L 12 Influence of family or friends
ALN_3N 13 Life change
ALN_3M 14 Other - Specify
DK, R

ALN_C7S If ALN_Q7 = 14, go to ANC_Q7S. Otherwise, go to ALN_END.

ALN_Q7S INTERVIEWER: Specify.

_________________________

(80 spaces)

DK, R

ALN_END
Driving and safety (DRV)

DRV_BEG

DRV_C01A If (do DRV block = 2), go to DRV_END.
DRVFD0 Otherwise, go to DRV_C01B.

DRV_C01B If proxy interview, go to DRV_END.
Otherwise, go to DRV_R1.

DRV_R1 The next questions are about driving a motor vehicle. By motor vehicle, we mean a car, truck or van.
INTERVIEWER: Press <Enter> to continue.

DRV_Q01A In the past 12 months, have you driven a motor vehicle?
DRV_01A INTERVIEWER: Include cars, trucks and vans. Exclude motorcycles and off-road vehicles.

1 Yes
2 No
DK, R (Go to DRV_END)

DRV_Q01B In the past 12 months, have you driven a motorcycle?
DRV_01B

1 Yes
2 No
DK, R

DRV_C02 If DRV_Q01A = 2 and DRV_Q01B = 2 or DK or R, go to DRV_R2.
Otherwise, go to DRV_C02A.

DRV_C02A If DRV_Q01A = 1, go to DRV_Q02.
Otherwise, go to DRV_Q04.

DRV_Q02 How often do you fasten your seat belt when you drive a motor vehicle?
DRV_02 INTERVIEWER: Read categories to respondent.

1 Always
2 Most of the time
3 Rarely
4 Never
DK, R

DRV_Q03 Counting hands-free use, how often do you use a cell phone while you are driving a motor vehicle?
DRV_03 INTERVIEWER: Read categories to respondent.
INTERVIEWER: If respondent does not use a cell phone, select «Never».

1 Often
2 Sometimes
3 Rarely
4 Never
DK, R

Optional Content selected by health regions in: Manitoba, Saskatchewan, Alberta, and Northwest Territories
How often do you drive when you are feeling tired?

1. Often
2. Sometimes
3. Rarely
4. Never

Compared to other drivers, would you say you usually drive:

INTERVIEWER: Read categories to respondent.

1. ... much faster?
2. ... a little faster?
3. ... about the same speed?
4. ... a little slower?
5. ... much slower?

(Compared to other drivers,) would you say you usually drive:

INTERVIEWER: Read categories to respondent.

1. ... much more aggressively?
2. ... a little more aggressively?
3. ... about the same?
4. ... a little less aggressively?
5. ... much less aggressively?

If ALC_Q1 = 1 (drank alcohol in past 12 months) and (DRV_Q01A = 1 (drove a motor vehicle) or DRV_Q01B = 1 (Drove a motorcycle)), go to DRV_Q07.
Otherwise, go to DRV_R2.

In the past 12 months, have you driven a motor vehicle after having 2 or more drinks in the hour before you drove?

INTERVIEWER: Include cars, trucks, vans and motorcycles. Exclude off-road vehicles.

1. Yes
2. No (Go to DRV_R2)

How many times (in the past 12 months)?

(Number: 1 to 95; warning after 20)

Now some questions about being a passenger in a motor vehicle.

INTERVIEWER: Press <Enter> to continue.
<table>
<thead>
<tr>
<th>Question ID</th>
<th>Question Text</th>
<th>Response Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>DRV_Q08A</td>
<td>When you are a front seat passenger, how often do you fasten your seat belt?</td>
<td>Always, Most of the time, Rarely, Never, Do not ride in front seat</td>
</tr>
<tr>
<td>DRV_Q08B</td>
<td>When you are a back seat passenger, how often do you fasten your seat belt?</td>
<td>Always, Most of the time, Rarely, Never, Do not ride in back seat</td>
</tr>
<tr>
<td>DRV_Q09</td>
<td>When you are a passenger in a taxi, how often do you fasten your seat belt?</td>
<td>Always, Most of the time, Rarely, Never, Do not take taxis</td>
</tr>
<tr>
<td>DRV_Q10</td>
<td>In the past 12 months, have you been a passenger with a driver who had 2 or more drinks in the hour before driving?</td>
<td>Yes, No (Go to DRV_Q11A)</td>
</tr>
<tr>
<td>DRV_Q10A</td>
<td>How many times (in the past 12 months)?</td>
<td></td>
</tr>
<tr>
<td>DRV_Q11A</td>
<td>In the past 12 months, have you been the driver of, or a passenger in, a snowmobile, motor boat or seadoo?</td>
<td>Yes, No (Go to DRV_END)</td>
</tr>
<tr>
<td>DRV_Q11B</td>
<td>In the past 12 months, have you been the driver of, or a passenger in, an ATV (all terrain vehicle)?</td>
<td>Yes, No (Go to DRV_C13)</td>
</tr>
</tbody>
</table>

Canadian Community Health Survey, 2008 Questionnaire, 159
How often do you wear a helmet when on an ATV?

INTERVIEWER: Read categories to respondent.

1  Always
2  Most of the time
3  Rarely
4  Never

Note: If DRV_Q11A = 1 and DRV_Q11B = 1, use “a snowmobile, motor boat, seadoo or ATV” in DRV_Q13 and DRV_Q14.
If DRV_Q11A = 1 and DRV_Q11B = 2, use “a snowmobile, motor boat or seadoo” in DRV_Q13 and DRV_Q14.
If DRV_Q11A = 2 and DRV_Q11B = 1, use “an ATV” in DRV_Q13 and DRV_Q14.

In the past 12 months, have you been a passenger on [a snowmobile, motor boat, seadoo or ATV/a snowmobile, motor boat or seadoo/an ATV] with a driver who had 2 or more drinks in the hour before driving?

1  Yes
2  No (Go to DRV_C14)

Note: If ALC_Q1 = 1 (drank alcohol in the past 12 months), go to DRV_Q14.
Otherwise, go to DRV_END.

In the past 12 months, have you driven [a snowmobile, motor boat, seadoo or ATV/a snowmobile, motor boat or seadoo/an ATV] after having 2 or more drinks in the hour before you drove?

1  Yes
2  No (Go to DRV_END)

Note: If ALC_Q1 = 1 (drank alcohol in the past 12 months), go to DRV_Q14.
Otherwise, go to DRV_END.

How many times (in the past 12 months)?

[MN] (MAX: 95; warning after 20)  

How many times (in the past 12 months)?

[MN] (MAX: 95; warning after 20)

[END]
Alcohol use - Dependence (ALD)

ALD_BEG

ALD_C01A If (do ALD block = 2) or proxy interview, go to ALD_END.

ALDFDO Otherwise, go to ALD_C01B.

ALD_C01B If ALC_Q3 > 2 (has had at least 5 drinks at least once a month), go to ALD_R1. Otherwise, go to ALD_END.

ALD_R1 The next questions are about how drinking can affect people in their activities. We will be referring to the past 12 months, that is, from [date one year ago] to yesterday.

INTERVIEWER: Press <Enter> to continue.

ALD_Q01 In the past 12 months, have you ever been drunk or hung-over while at work, school or while taking care of children?

1  Yes
2  No  (Go to ALD_Q03)
DK, R  (Go to ALD_END)

ALD_Q02 How many times? Was it:

INTERVIEWER: Read categories to respondent.

1  ... Once or twice?
2  ... 3 to 5 times?
3  ... 6 to 10 times?
4  ... 11 to 20 times?
5  ... More than 20 times?
DK, R

ALD_Q03 In the past 12 months, were you ever in a situation while drunk or hung-over which increased your chances of getting hurt? (For example, driving a boat, using guns, crossing against traffic, or during sports.)

1  Yes
2  No
DK, R

ALD_Q04 (In the past 12 months,) have you had any emotional or psychological problems because of alcohol use, such as feeling uninterested in things, depressed or suspicious of people?

1  Yes
2  No
DK, R

ALD_Q05 (In the past 12 months,) have you had such a strong desire or urge to drink alcohol that you could not resist it or could not think of anything else?

1  Yes
2  No
DK, R

ALD_Q06 (In the past 12 months,) have you had a period of a month or more when you spent a great deal of time getting drunk or being hung-over?

1  Yes
2  No
DK, R
ALD_Q07
In the past 12 months, did you ever drink much more or for a longer period of time than you intended?
1 Yes
2 No (Go to ALD_Q09)
DK, R (Go to ALD_Q09)

ALD_Q08
How many times? Was it:
INTERVIEWER: Read categories to respondent.
1 ... Once or twice?
2 ... 3 to 5 times?
3 ... 6 to 10 times?
4 ... 11 to 20 times?
5 ... More than 20 times?
DK, R

ALD_Q09
In the past 12 months, did you ever find that you had to drink more alcohol than usual to get the same effect or that the same amount of alcohol had less effect on you than usual?
1 Yes
2 No
DK, R

ALD_Q10
In the past 12 months, did you ever have a period when you stopped, cut down, or went without alcohol and then experienced symptoms like fatigue, headaches, diarrhea, the shakes or emotional problems?
1 Yes
2 No
DK, R

ALD_Q11
(In the past 12 months,) did you ever have a period when you drank alcohol even though you promised yourself you wouldn't, or when you drank a lot more than you intended?
1 Yes
2 No
DK, R

ALD_Q12
(In the past 12 months,) did you ever have a period of several days or more when you spent so much time drinking alcohol or recovering from the effects that you had little time for anything else?
1 Yes
2 No
DK, R

ALD_Q13
(In the past 12 months,) did you ever have a period of a month or longer when you gave up or greatly reduced important activities because of your use of alcohol?
1 Yes
2 No
DK, R
ALD_Q14 (In the past 12 months,) did you ever continue to drink alcohol when you knew you had a serious physical or emotional problem that might have been caused by or made worse by your alcohol use?

1 Yes
2 No
DK, R

ALD_C15 If count of "Yes" responses (1) in (ALD_Q01, ALD_Q03, ALD_Q04, ALD_Q05, ALD_Q06, ALD_Q07, ALD_Q09, ALD_Q10, ALD_Q11, ALD_Q12, ALD_Q13, and ALD_Q14) = 0, go to ALD_END.

ALD_R15 Please tell me what number best describes how much your use of alcohol interfered with each of the following activities during the past 12 months. For each activity, answer with a number between 0 and 10; 0 means "no interference", while 10 means "very severe interference".
INTERVIEWER: Press <Enter> to continue.

ALD_Q15A In the past 12 months, how much did your alcohol use interfere with:

... your home responsibilities, like cleaning, shopping and taking care of the house or apartment?

0 No interference
1 |
2 |
3 |
4 |
5 |
6 |
7 |
8 |
9 V
10 Very severe interference

| | | Number
(MIN: 0) (MAX: 10)
DK, R

ALD_Q15B_1 (How much did it interfere with:)

... your ability to attend school?
INTERVIEWER: If necessary, enter "11" to indicate "Not applicable".

0 No interference
1 |
2 |
3 |
4 |
5 |
6 |
7 |
8 |
9 V
10 Very severe interference

| | | Number
(MIN: 0) (MAX: 11)
DK, R
ALD_Q15B_2 (How much did it interfere with:)

ALD_5B2 ...

your ability to work at a job?

INTERVIEWER: If necessary, enter “11” to indicate “Not applicable”.

0 No interference
1 I
2 I
3 I
4 I
5 I
6 I
7 I
8 I
9 V
10 Very severe interference

___|___ Number
(MIN: 0) (MAX: 11)
DK, R

ALD_Q15C (In the past 12 months,) how much did your alcohol use interfere with your ability to form

ALD_15C and maintain close relationships with other people? (Remember that 0 means “no

interference” and 10 means “very severe interference”.)

0 No interference
1 I
2 I
3 I
4 I
5 I
6 I
7 I
8 I
9 V
10 Very severe interference

___|___ Number
(MIN: 0) (MAX: 10)
DK, R

ALD_Q15D How much did it interfere with your social life?

ALD_15D

0 No interference
1 I
2 I
3 I
4 I
5 I
6 I
7 I
8 I
9 V
10 Very severe interference

___|___ Number
(MIN: 0) (MAX: 10)
DK, R

ALD_END
Maternal experiences - Breastfeeding (MEX)

MEX_BEG

MEX_C01A  If (do MEX block = 1), go to MEX_C01B. Otherwise, go to MEX_END.

MEX_C01B  If proxy interview or sex = male or age < 15 or > 55, go to MEX_END. Otherwise, go to MEX_Q01.

MEX_Q01  The next questions are for recent mothers.

MEX_01  Have you given birth in the past 5 years?

INTERVIEWER: Do not include stillbirths.

1  Yes
2  No  (Go to MEX_END)
   DK, R  (Go to MEX_END)

MEX_Q01A  In what year?

INTERVIEWER: Enter year of birth of last baby. Minimum is [current year - 5]; maximum is [current year].

\[ \ldots \] Year
   (MIN: current year - 5)(MAX: current year)
   DK, R

MEX_Q02  Did you take a vitamin supplement containing folic acid before your (last) pregnancy, that is, before you found out that you were pregnant?

1  Yes
2  No
   DK, R

MEX_Q03  (For your last baby,) did you breastfeed or try to breastfeed your baby, even if only for a short time?

1  Yes  (Go to MEX_Q05)
2  No  (Go to MEX_END)
   DK, R  (Go to MEX_END)

MEX_Q04  What is the main reason that you did not breastfeed?

1  Bottle feeding easier
2  Formula as good as breast milk
3  Breastfeeding is unappealing / disgusting
4  Father / partner didn’t want me to
5  Returned to work / school early
6  C-Section
7  Medical condition - mother
8  Medical condition - baby
9  Premature birth
10  Multiple births (e.g. twins)
11  Wanted to drink alcohol
12  Wanted to smoke
13  Other - Specify
   DK, R

MEX_C04S  If MEX_Q04 = 13, go to MEX_Q04S. Otherwise, go to MEX_END.
MEX_Q04S  INTERVIEWER: Specify.

________________________________________
(80 spaces)
DK, R

Go to MEX_END

MEX_Q05  Are you still breastfeeding?

1   Yes   (Go to MEX_Q07)
2   No
   DK, R   (Go to MEX_END)

MEX_Q06  How long did you breastfeed (your last baby)?

1   Less than 1 week
2   1 to 2 weeks
3   3 to 4 weeks
4   5 to 8 weeks
5   9 weeks to less than 12 weeks
6   3 months (12 weeks to less than 16 weeks)
7   4 months (16 weeks to less than 20 weeks)
8   5 months (20 weeks to less than 24 weeks)
9   6 months (24 weeks to less than 28 weeks)
10  7 to 9 months
11  10 to 12 months
12  More than 1 year
   DK, R   (Go to MEX_END)

MEX_Q07  How old was your (last) baby when you first added any other liquids (e.g. milk, formula, water, teas, herbal mixtures) or solid foods to the baby's feeds?

INTERVIEWER: If exact age not known, obtain best estimate.

1   Less than 1 week
2   1 to 2 weeks
3   3 to 4 weeks
4   5 to 8 weeks
5   9 weeks to less than 12 weeks
6   3 months (12 weeks to less than 16 weeks)
7   4 months (16 weeks to less than 20 weeks)
8   5 months (20 weeks to less than 24 weeks)
9   6 months (24 weeks to less than 28 weeks)
10  7 to 9 months
11  10 to 12 months
12  More than 1 year
13  Have not added liquids or solids   (Go to MEX_Q09)
   DK, R   (Go to MEX_END)

MEX_E07  An unusual length of time has passed between when the baby stopped breastfeeding and when other liquid or solid foods were first added to the feeds.

Interviewer: Please confirm. If answers are valid, ask for the reason explaining the gap and enter it as a remark.

Trigger soft edit:  IF MEX_07 < 13 AND ORD(MEX_Q07) – ORD(MEX_Q06) > 1

Note:  In other words, if MEX_Q07 < 13 AND category number in MEX_Q07 minus category number in MEX_Q06 is greater than 1.
What is the main reason that you first added other liquids or solid foods?

1. Not enough breast milk
2. Baby was ready for solid foods
3. Inconvenience / fatigue due to breastfeeding
4. Difficulty with BF techniques (e.g., sore nipples, engorged breasts, mastitis)
5. Medical condition - mother
6. Medical condition - baby
7. Advice of doctor / health professional
8. Returned to work / school
9. Advice of partner / family / friends
10. Formula equally healthy for baby
11. Wanted to drink alcohol
12. Wanted to smoke
13. Other - Specify

Note: If MEX_Q08 = 13, go to MEX_Q08S. Otherwise, go to MEX_C09.

INTERVIEWER: Specify.

(80 spaces)

DK, R

If MEX_Q09 = 1 (baby less than 1 week), go to MEX_C10. Otherwise, go to MEX_Q09.

During the time when your (last) baby was only fed breast milk, did you give the baby a vitamin supplement containing Vitamin D?

1. Yes
2. No

DK, R

If MEX_Q05 = 1 (still breastfeeding), go to MEX_END. Otherwise, go to MEX_Q10.

What is the main reason that you stopped breastfeeding?

1. Not enough breast milk
2. Baby was ready for solid foods
3. Inconvenience / fatigue due to breastfeeding
4. Difficulty with BF techniques (e.g., sore nipples, engorged breasts, mastitis)
5. Medical condition - mother
6. Medical condition - baby
7. Planned to stop at this time
8. Child weaned him / herself (e.g., baby biting, refusing breast)
9. Advice of doctor / health professional
10. Returned to work / school
11. Advice of partner / family / friends
12. Formula equally healthy for baby
13. Wanted to drink alcohol
14. Wanted to smoke
15. Other - Specify

DK, R
MEX_C10S  If MEX_Q10 = 15, go to MEX_Q10S. Otherwise, go to MEX_END.

MEX_Q10S  INTERVIEWER: Specify.

(80 spaces)
DK, R

MEX_END
Maternal experiences – Alcohol use during pregnancy (MXA)

MXA_BEG

MXA_C01A If (do MXA block = 1), go to MXA_C01B. Otherwise, go to MXA_END.

MXA_C01B If proxy interview or sex = male or age < 15 or > 55 or MEX_Q01 = 2, DK or R, go to MXA_END. Otherwise, go to MXA_C30.

MXA_C30 If ALC_Q1 = 2, DK or R, and ALN_Q5B = 2, DK or R, (didn’t drink in past 12 months or never drank), go to MXA_END. Otherwise, go to MXA_Q30.

MXA_Q30 Did you drink any alcohol during your last pregnancy?

MXA_01

1 Yes
2 No (Go to MXA_C32)
DK, R (Go to MXA_END)

MXA_Q31 How often did you drink?

MXA_02

1 Less than once a month
2 Once a month
3 2 to 3 times a month
4 Once a week
5 2 to 3 times a week
6 4 to 6 times a week
7 Every day
DK, R

MXA_C32 If MEX_Q03 = 2 (did not breastfeed last baby), go to MXA_END. Otherwise, go to MXA_Q32.

MXA_Q32 Did you drink any alcohol while you were breastfeeding (your last baby)?

MXA_03

1 Yes
2 No (Go to MXA_END)
DK, R (Go to MXA_END)

MXA_Q33 How often did you drink?

MXA_04

1 Less than once a month
2 Once a month
3 2 to 3 times a month
4 Once a week
5 2 to 3 times a week
6 4 to 6 times a week
7 Every day
DK, R

MXA_END
Maternal experiences – Smoking during pregnancy (MXS)

**MXS_BEG**

If (do MXS block = 1), go to MXS_C01B. Otherwise, go to MXS_END.

**MXS_C01A**

If proxy interview or sex = male or age < 15 or > 55 or MEX_Q01 = 2, DK or R, go to MXS_END. Otherwise, go to MXS_C20.

**MXS_C01B**

If SMK_Q202 = (1 or 2) or SMK_Q201A = 1 or SMK_Q201B = 1, go to MXS_Q20. Otherwise, go to MXS_END.

**MXS_Q20**

During your last pregnancy, did you smoke daily, occasionally or not at all?

**MXS_01**

1. Daily
2. Occasionally (Go to MXS_Q22)
3. Not at all (Go to MXS_Q23)
   - DK, R (Go to MXS_Q26)

**Daily Smokers only**

**MXS_Q21**

How many cigarettes did you usually smoke each day?

**MXS_02**

1. Number of cigarettes
   - (MIN: 1) (MAX: 99; warning after 60)
   - DK, R
   - Go to MXS_C23

**Occasional Smokers only**

**MXS_Q22**

On the days that you smoked, how many cigarettes did you usually smoke?

**MXS_03**

1. Number of cigarettes
   - (MIN: 1) (MAX: 99; warning after 60)
   - DK, R

**MXS_C23**

If MEX_Q03 = 1 (breastfed last baby), go to MXS_Q23. Otherwise, go to MXS_Q26.

**MXS_Q23**

When you were breastfeeding (your last baby), did you smoke daily, occasionally or not at all?

**MXS_04**

1. Daily
2. Occasionally (Go to MXS_Q25)
3. Not at all (Go to MXS_Q26)
   - DK, R (Go to MXS_Q26)

**Daily smokers only**

**MXS_Q24**

How many cigarettes did you usually smoke each day?

**MXS_05**

1. Number of cigarettes
   - (MIN: 1) (MAX: 99; warning after 60)
   - DK, R
   - Go to MXS_Q26
Occasional smokers only

MXS_Q25  On the days that you smoked, how many cigarettes did you usually smoke?
MXS_06   
   _ _ _ Number of cigarettes
   (MIN: 1) (MAX: 99; warning after 60)
   DK, R

MXS_Q26  Did anyone regularly smoke in your presence during or after the pregnancy (about 6
MXS_07   months after)?
   1    Yes
   2    No
   DK, R

MXS_END
Illicit drugs use (IDG)

DRG_BEG

DRG_C1  If (do DRG block = 1), go to DRG_C2.

IDGFOPT  Otherwise, go to DRG_END.

DRG_C2  If proxy interview, go to DRG_END.

Otherwise, go to DRG_R1.

DRG_R1  I am going to ask some questions about drug use. Again, I would like to remind you that everything you say will remain strictly confidential.

INTERVIEWER: Press <Enter> to continue.

DRG_Q01  Have you ever used or tried marijuana, cannabis or hashish?

IDG_01  INTERVIEWER: Read categories to respondent.

1  Yes, just once
2  Yes, more than once
3  No  (Go to DRG_Q04)

DK, R  (Go to DRG_END)

DRG_Q02  Have you used it in the past 12 months?

IDG_02  1  Yes
2  No  (Go to DRG_Q04)

DK, R  (Go to DRG_Q07)

DRG_C03  If DRG_Q01 = 1, go to DRG_Q04.

DRG_Q03  How often (did you use marijuana, cannabis or hashish in the past 12 months)?

IDG_03  INTERVIEWER: Read categories to respondent.

1  Less than once a month
2  1 to 3 times a month
3  Once a week
4  More than once a week
5  Every day

DK, R

DRG_Q04  Have you ever used or tried cocaine or crack?

IDG_04  1  Yes, just once
2  Yes, more than once
3  No  (Go to DRG_Q07)

DK, R  (Go to DRG_Q07)

DRG_Q05  Have you used it in the past 12 months?

IDG_05  1  Yes
2  No  (Go to DRG_Q07)

DK, R  (Go to DRG_Q07)

DRG_C06  If DRG_Q04 = 1, go to DRG_Q07.
DRG_Q06  How often (did you use cocaine or crack in the past 12 months)?
IDG_06  INTERVIEWER: Read categories to respondent.

1  Less than once a month
2  1 to 3 times a month
3  Once a week
4  More than once a week
5  Every day
DK, R

DRG_Q07  Have you ever used or tried speed (amphetamines)?
IDG_07

1  Yes, just once
2  Yes, more than once
3  No  (Go to DRG_Q10)
   DK, R  (Go to DRG_Q10)

DRG_Q08  Have you used it in the past 12 months?
IDG_08

1  Yes
2  No  (Go to DRG_Q10)
   DK, R  (Go to DRG_Q10)

DRG_C09  If DRG_Q07 = 1, go to DRG_Q10.

DRG_Q09  How often (did you use speed (amphetamines) in the past 12 months)?
IDG_09  INTERVIEWER: Read categories to respondent.

1  Less than once a month
2  1 to 3 times a month
3  Once a week
4  More than once a week
5  Every day
DK, R

DRG_Q10  Have you ever used or tried ecstasy (MDMA) or other similar drugs?
IDG_10

1  Yes, just once
2  Yes, more than once
3  No  (Go to DRG_Q13)
   DK, R  (Go to DRG_Q13)

DRG_Q11  Have you used it in the past 12 months?
IDG_11

1  Yes
2  No  (Go to DRG_Q13)
   DK, R  (Go to DRG_Q13)

DRG_C12  If DRG_Q10 = 1, go to DRG_Q13.

DRG_Q12  How often (did you use ecstasy or other similar drugs in the past 12 months)?
IDG_12  INTERVIEWER: Read categories to respondent.

1  Less than once a month
2  1 to 3 times a month
3  Once a week
4  More than once a week
5  Every day
DK, R
Have you ever used or tried hallucinogens, PCP or LSD (acid)?

1. Yes, just once
2. Yes, more than once
3. No (Go to DRG_Q16)  DK, R (Go to DRG_Q16)

Have you used it in the past 12 months?

1. Yes
2. No (Go to DRG_Q16)  DK, R (Go to DRG_Q16)

If DRG_Q13 = 1, go to DRG_Q16.

How often (did you use hallucinogens, PCP or LSD in the past 12 months)?

INTERVIEWER: Read categories to respondent.

1. Less than once a month
2. 1 to 3 times a month
3. Once a week
4. More than once a week
5. Every day  DK, R

Did you ever sniff glue, gasoline or other solvents?

1. Yes, just once
2. Yes, more than once  
3. No (Go to DRG_Q19)  DK, R (Go to DRG_Q19)

Did you sniff some in the past 12 months?

1. Yes
2. No (Go to DRG_Q19)  DK, R (Go to DRG_Q19)

If DRG_Q16 = 1, go to DRG_Q19.

How often (did you sniff glue, gasoline or other solvents in the past 12 months)?

INTERVIEWER: Read categories to respondent.

1. Less than once a month
2. 1 to 3 times a month
3. Once a week
4. More than once a week
5. Every day  DK, R

Have you ever used or tried heroin?

1. Yes, just once
2. Yes, more than once  
3. No (Go to DRG_Q22)  DK, R (Go to DRG_Q22)
DRG_Q20 Have you used it in the past 12 months?

IDG_20
1 Yes
2 No (Go to DRG_Q22)
DK, R (Go to DRG_Q22)

DRG_C21 If DRG_Q19 = 1, go to DRG_Q22.

DRG_Q21 How often (did you use heroin in the past 12 months)?

IDG_21 INTERVIEWER: Read categories to respondent.

1 Less than once a month
2 1 to 3 times a month
3 Once a week
4 More than once a week
5 Every day
DK, R

DRG_Q22 Have you ever used or tried steroids, such as testosterone, dianabol or growth hormones, to increase your performance in a sport or activity or to change your physical appearance?

IDG_22
1 Yes, just once
2 Yes, more than once
3 No (Go to DRG_C25A_1)
DK, R (Go to DRG_C25A_1)

DRG_Q23 Have you used it in the past 12 months?

IDG_23
1 Yes
2 No (Go to DRG_C25A1)
DK, R (Go to DRG_C25A1)

DRG_C24 If DRG_Q22 = 1, go to DRG_C25A1

DRG_Q24 How often (did you use steroids in the past 12 months)?

IDG_24 INTERVIEWER: Read categories to respondent.

1 Less than once a month
2 1 to 3 times a month
3 Once a week
4 More than once a week
5 Every day
DK, R

DRG_C25A_1 DRG_C25A1 = Count of instances where DRG_Q01, DRG_Q04, DRG_Q07, DRG_Q10, DRG_Q13, DRG_Q16 and DRG_Q19 = 3, DK or R.

If DRG_C25A1 = 7, go to DRG_END.

DRG_C25A_2 DRG_C25A2 = Count of instances where DRG_Q03, DRG_Q06, DRG_Q09, DRG_Q12, DRG_Q15, DRG_Q18 and DRG_Q21 >= 2.

If DRG_C25A_2 >= 1, go to DRG_Q25A.
Otherwise, go to DRG_END.
DRG_Q25A  During the past 12 months, did you ever need to use more drugs than usual in order to get high, or did you ever find that you could no longer get high on the amount you usually took?

1  Yes
2  No
DK, R

DRG_R25B  People who cut down their substance use or stop using drugs altogether may not feel well if they have been using steadily for some time. These feelings are more intense and can last longer than the usual hangover.

INTERVIEWER: Press <Enter> to continue.

DRG_Q25B  During the past 12 months, did you ever have times when you stopped, cut down or went without drugs and then experienced symptoms like fatigue, headaches, diarrhea, the shakes or emotional problems?

1  Yes
2  No
DK, R

DRG_Q25C  (During the past 12 months,) did you ever have times when you used drugs to keep from having such symptoms?

1  Yes
2  No
DK, R

DRG_Q25D  (During the past 12 months,) did you ever have times when you used drugs even though you promised yourself you wouldn’t, or times when you used a lot more drugs than you intended?

1  Yes
2  No
DK, R

DRG_Q25E  (During the past 12 months,) were there ever times when you used drugs more frequently, or for more days in a row than you intended?

1  Yes
2  No
DK, R

DRG_Q25F  (During the past 12 months,) did you ever have periods of several days or more when you spent so much time using drugs or recovering from the effects of using drugs that you had little time for anything else?

1  Yes
2  No
DK, R

DRG_Q25G  (During the past 12 months,) did you ever have periods of a month or longer when you gave up or greatly reduced important activities because of your use of drugs?

1  Yes
2  No
DK, R
DRG_Q25H  IDG_25H  
(During the past 12 months,) did you ever continue to use drugs when you knew you had a serious physical or emotional problem that might have been caused by or made worse by your use?

1  Yes  
2  No  
DK, R

DRG_R26  
Please tell me what number best describes how much your use of drugs interfered with each of the following activities during the past 12 months. For each activity, answer with a number between 0 and 10; 0 means “no interference”, while 10 means “very severe interference”.
INTERVIEWER: Press <Enter> to continue.

DRG_Q26A  IDG_26A  
How much did your use of drugs interfere with:

... your home responsibilities, like cleaning, shopping and taking care of the house or apartment?

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DK, R

DRG_Q26B_1  IDG_6B1  
(How much did your use interfere with:)

... your ability to attend school?
INTERVIEWER: If necessary, enter “11” to indicate “Not applicable”.

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DK, R
**DRG_Q26B_2**  
*(How much did your use interfere with:)*

... your ability to work at a regular job?

**INTERVIEWER**: If necessary, enter “11” to indicate “Not applicable”.

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**DRG_Q26C**  
*(During the past 12 months,) how much did your use of drugs interfere with your ability to form and maintain close relationships with other people? Remember that 0 means “no interference” and 10 means “very severe interference”.

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DK, R

**DRG_Q26D**  
*How much did your use of drugs interfere with your social life?*

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(MIN: 0) (MAX: 10)  
DK, R

**DRG_END**

*Canadian Community Health Survey, 2008 Questionnaire, 178*
Problem gambling (CPG)

CPG_BEG

CPG_C01 If (do CPG block = 2), go to CPG_END.
Otherwise, go to CPG_C02.

CPG_C02 If proxy interview, go to CPG_END.
Otherwise, go to CPG_R01.

CPG_R01 The next questions are about gambling activities and experiences.

People have different definitions of gambling. They may bet money and gamble on many
different things, including buying lottery tickets, playing bingo or playing card games with
their family or friends.

Some of these questions may not apply to you; however, they need to be asked of all
respondents.
INTERVIEWER: Press <Enter> to continue.

CPG_Q01A In the past 12 months, how often have you bet or spent money on instant win/scratch
tickets or daily lottery tickets (Keno, Pick 3, Encore, Banco, Extra)?
INTERVIEWER: Read categories to respondent.
Exclude all other kinds of lottery tickets such as 6/49, Super 7, sports lotteries and fund raising
tickets.

1  Daily
2  Between 2 to 6 times a week
3  About once a week
4  Between 2 to 3 times a month
5  About once a month
6  Between 6 to 11 times a year
7  Between 1 to 5 times a year
8  Never

DK, R

CPG_C01A If CPG_Q01A = R, go to CPG_END
Otherwise, go to CPG_C01B.

CPG_Q01B (In the past 12 months,) how often have you bet or spent money on lottery tickets such as
6/49 and Super 7, raffles or fund-raising tickets?

1  Daily
2  Between 2 to 6 times a week
3  About once a week
4  Between 2 to 3 times a month
5  About once a month
6  Between 6 to 11 times a year
7  Between 1 to 5 times a year
8  Never

DK, R

Note: CPG_C01B = Count instances where CPG_Q01B to CPG_Q01M = 7, 8, DK or R.
CPG_Q01C  (In the past 12 months,) how often have you bet or spent money on Bingo?

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never
   DK, R

CPG_Q01D  (In the past 12 months,) how often have you bet or spent money playing cards or board games with family or friends?

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never
   DK, R

CPG_Q01E  (In the past 12 months,) how often have you bet or spent money on video lottery terminals (VLTs) outside of casinos?

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never
   DK, R

CPG_Q01F  (In the past 12 months,) how often have you bet or spent money on coin slots or VLTs at a casino?

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never
   DK, R
**CPG_Q01G** (In the past 12 months,) how often have you bet or spent money on casino games other than coin slots or VLTs (for example, poker, roulette, blackjack, Keno)?

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**CPG_Q01H** (In the past 12 months,) how often have you bet or spent money on Internet or arcade gambling?

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</table>

**CPG_Q01I** In the past 12 months, how often have you bet or spent money on live horse racing at the track or off track?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Daily</td>
</tr>
<tr>
<td>2</td>
<td>Between 2 to 6 times a week</td>
</tr>
<tr>
<td>3</td>
<td>About once a week</td>
</tr>
<tr>
<td>4</td>
<td>Between 2 to 3 times a month</td>
</tr>
<tr>
<td>5</td>
<td>About once a month</td>
</tr>
<tr>
<td>6</td>
<td>Between 6 to 11 times a year</td>
</tr>
<tr>
<td>7</td>
<td>Between 1 to 5 times a year</td>
</tr>
<tr>
<td>8</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>

**CPG_Q01J** (In the past 12 months,) how often have you bet or spent money on sports such as sports lotteries (Sport Select, Pro-Line, Mise-au-jeu, Total), sports pool or sporting events?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Daily</td>
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<tr>
<td>4</td>
<td>Between 2 to 3 times a month</td>
</tr>
<tr>
<td>5</td>
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</tr>
<tr>
<td>6</td>
<td>Between 6 to 11 times a year</td>
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<tr>
<td>7</td>
<td>Between 1 to 5 times a year</td>
</tr>
<tr>
<td>8</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>
(In the past 12 months,) how often have you bet or spent money on speculative investments such as stocks, options or commodities?

INTERVIEWER: Speculative investments refers to buying high-risk stocks, but does not include low-risk bonds, RRSPs and/or mutual funds.

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never

DK, R

In the past 12 months, how often have you bet or spent money on games of skill such as pool, golf, bowling or darts?

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never

DK, R

(In the past 12 months,) how often have you bet or spent money on any other forms of gambling such as dog races, gambling at casino nights/country fairs, bet on sports with a bookie or gambling pools at work?

1. Daily
2. Between 2 to 6 times a week
3. About once a week
4. Between 2 to 3 times a month
5. About once a month
6. Between 6 to 11 times a year
7. Between 1 to 5 times a year
8. Never

DK, R

If CPG_C01B = 12 and CPG_Q01A = 7, 8 or DK, go to CPG_END. Otherwise, go to CPG_Q01N.

In the past 12 months, how much money, not including winnings, did you spend on all of your gambling activities?

INTERVIEWER: Read categories to respondent.

1. Between 1 dollar and 50 dollars
2. Between 51 dollars and 100 dollars
3. Between 101 dollars and 250 dollars
4. Between 251 dollars and 500 dollars
5. Between 501 dollars and 1000 dollars
6. More than 1000 dollars

DK, R

The next questions are about gambling attitudes and experiences. Again, all the questions will refer to the past 12 months.

INTERVIEWER: Press <Enter> to continue.
In the past 12 months, how often have you bet or spent more money than you wanted to on gambling?

INTERVIEWER: Read categories to respondent.

1. Never
2. Sometimes
3. Most of the time
4. Almost always
5. I am not a gambler (Go to CPG_END)
   DK
   R (Go to CPG_END)

(In the past 12 months,) how often have you needed to gamble with larger amounts of money to get the same feeling of excitement?

1. Never
2. Sometimes
3. Most of the time
4. Almost always
   DK, R

(In the past 12 months,) when you gambled, how often did you go back another day to try to win back the money you lost?

1. Never
2. Sometimes
3. Most of the time
4. Almost always
   DK, R

In the past 12 months, how often have you borrowed money or sold anything to get money to gamble?

1. Never
2. Sometimes
3. Most of the time
4. Almost always
   DK, R

(In the past 12 months,) how often have you felt that you might have a problem with gambling?

1. Never
2. Sometimes
3. Most of the time
4. Almost always
   DK, R

(In the past 12 months,) how often has gambling caused you any health problems, including stress or anxiety?

1. Never
2. Sometimes
3. Most of the time
4. Almost always
   DK, R
CPG_Q08 (In the past 12 months,) how often have people criticized your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

CPG_Q09 (In the past 12 months,) how often has your gambling caused financial problems for you or your family?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

CPG_Q10 In the past 12 months, how often have you felt guilty about the way you gamble or what happens when you gamble?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

CPG_Q11 (In the past 12 months,) how often have you lied to family members or others to hide your gambling?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

CPG_Q12 (In the past 12 months,) how often have you wanted to stop betting money or gambling, but didn’t think you could?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

CPG_Q13 In the past 12 months, how often have you bet more than you could really afford to lose?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

CPG_Q14 (In the past 12 months,) have you tried to quit or cut down on your gambling but were unable to do it?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R
(In the past 12 months,) have you gambled as a way of forgetting problems or to feel better when you were depressed?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

(In the past 12 months,) has your gambling caused any problems with your relationship with any of your family members or friends?

1 Never
2 Sometimes
3 Most of the time
4 Almost always
DK, R

Note: For CPG_Q03 through CPG_Q10 and CPG_Q13, recode 1=0, 2=1, 3=2 and 4=3 into CPG_C17A through CPG_C17I. CPG_C17J = Sum CPG_C17A through CPG_C17I.

CPG_C17J <= 2, go to CPG_END. Otherwise, go to CPG_Q17.

Has anyone in your family ever had a gambling problem?

1 Yes
2 No
DK, R

In the past 12 months, have you used alcohol or drugs while gambling?

1 Yes
2 No
DK, R

Please tell me what number best describes how much your gambling activities interfered with each of the following activities during the past 12 months. For each activity, answer with a number between 0 and 10; 0 means “no interference”, while 10 means “very severe interference”. INTERVIEWER: Press <Enter> to continue.

During the past 12 months, how much did your gambling activities interfere with your non-job responsibilities, like cleaning, shopping and taking care of the house or apartment?

0 No interference
1
2
3
4
5
6
7
8
9 V
10 Very severe interference

Number
(MIN: 0) (MAX: 10)
DK, R
**CPG_Q19B_1** How much did these activities interfere with your ability to attend school?

**INTERVIEWER:** If necessary, enter “11” to indicate “Not applicable”.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No interference</td>
</tr>
<tr>
<td>1, 2, 3, 4, 5, 6, 7, 8, 9</td>
<td>I</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

Number
(MIN: 0) (MAX: 11)
DK, R

**CPG_Q19B_2** How much did they interfere with your ability to work at a job?

**INTERVIEWER:** If necessary, enter “11” to indicate “Not applicable”.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No interference</td>
</tr>
<tr>
<td>1, 2, 3, 4, 5, 6, 7, 8, 9</td>
<td>I</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

Number
(MIN: 0) (MAX: 11)
DK, R

**CPG_Q19C** (During the past 12 months,) how much did your gambling activities interfere with your ability to form and maintain close relationships with other people? (Remember that 0 means “no interference” and 10 means “very severe interference”.)

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No interference</td>
</tr>
<tr>
<td>1, 2, 3, 4, 5, 6, 7, 8, 9</td>
<td>I</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

Number
(MIN: 0) (MAX: 10)
DK, R
**How much did they interfere with your social life?**

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No interference</td>
</tr>
<tr>
<td>1-9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

Number (MIN: 0) (MAX: 10)

DK, R
Sexual behaviours (SXB)

SXB_BEG

SXB_C01A If (do SXB block = 1), go to SXB_C01B. Otherwise, go to SXB_END.

SXB_C01B If proxy interview or age < 15 or > 49, go to SXB_END. Otherwise, go to SXB_R01.

SXB_R01

I would like to ask you a few questions about sexual behaviour. We ask these questions because sexual behaviours can have very important and long-lasting effects on personal health. You can be assured that anything you say will remain confidential.

INTERVIEWER: Press <Enter> to continue.

SXB_Q01

Have you ever had sexual intercourse?

1   Yes
2   No (Go to SXB_END)
DK, R  (Go to SXB_END)

SXB_Q02

How old were you the first time?

INTERVIEWER: Maximum is [current age].

|_____ Age in years
(MIN: 1; warning below 12) (MAX: current age)
DK, R  (Go to SXB_END)

SXB_E02

The entered age at which the respondent first had sexual intercourse is invalid. Please return and correct.

Trigger hard edit if SXB_Q02 < 1 or SXB_Q02 > [current age].

SXB_Q03

In the past 12 months, have you had sexual intercourse?

1   Yes
2   No  (Go to SXB_Q07)
DK, R  (Go to SXB_END)

SXB_Q04

With how many different partners?

1   1 partner
2   2 partners
3   3 partners
4   4 or more partners
DK, R  (Go to SXB_END)

SXB_Q07

Have you ever been diagnosed with a sexually transmitted disease?

1   Yes
2   No
DK, R
SXB_C08A  If SXB_Q03 = 1 (had intercourse in last 12 months), go to SXB_C08C. Otherwise, go to SXB_END.

SXB_C08C  If marital status = 1 (married) or 2 (common-law) and SXB_Q04 = 1 (one partner), go to SXB_C09B. Otherwise, go to SXB_Q08.

SXB_Q08  Did you use a condom the last time you had sexual intercourse?
SXB_7A  
1   Yes
2   No
   DK, R

SXB_C09B  If age > 24, go to SXB_END. Otherwise, go to SXB_R9A.

SXB_R9A  Now a few questions about birth control.
INTERVIEWER: Press <Enter> to continue.

SXB_C09C  If sex = female, go to SXB_C09D. Otherwise, go to SXB_R10.

SXB_C09D  If HWT_Q1 = 1 (currently pregnant), go to SXB_Q11. Otherwise, go to SXB_R9B.

SXB_R9B  I’m going to read you a statement about pregnancy. Please tell me if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree.
INTERVIEWER: Press <Enter> to continue.

SXB_Q09  It is important to me to avoid getting pregnant right now.
SXB_09 
1   Strongly agree  (Go to SXB_Q11)
2   Agree        (Go to SXB_Q11)
3   Neither agree nor disagree  (Go to SXB_Q11)
4   Disagree    (Go to SXB_Q11)
5   Strongly disagree  (Go to SXB_Q11)
   DK           (Go to SXB_Q11)
   R           (Go to SXB_END)

SXB_R10  I’m going to read you a statement about pregnancy. Please tell me if you strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree.
INTERVIEWER: Press <Enter> to continue.

SXB_Q10  It is important to me to avoid getting my partner pregnant right now.
SXB_10  
1   Strongly agree
2   Agree
3   Neither agree nor disagree
4   Disagree
5   Strongly disagree
6   Doesn’t have a partner right now
7   Partner already pregnant
   DK
   R   (Go to SXB_END)

SXB_Q11  In the past 12 months, did you and your partner usually use birth control?
SXB_11  
1   Yes   (Go to SXB_Q12)
2   No    (Go to SXB_END)
   DK, R  (Go to SXB_END)
What kind of birth control did you and your partner usually use?
INTERVIEWER: Mark all that apply.

1 Condom (male or female condom)
2 Birth control pill
3 Diaphragm
4 Spermicide (e.g., foam, jelly, film)
5 Birth control injection (Deprovera)
6 Other - Specify

If SXB_Q12 = 6, go to SXB_Q12S.
Otherwise, go to SXB_C13.

INTERVIEWER: Specify.

Specify (80 spaces)

If HWT_Q1 = 1 (currently pregnant) or SXB_Q10 = 7 (Partner already pregnant), go to SXB_END.
Otherwise, go to SXB_Q13.

What kind of birth control did you and your partner use the last time you had sex?
INTERVIEWER: Mark all that apply.

1 Condom (male or female condom)
2 Birth control pill
3 Diaphragm
4 Spermicide (e.g., foam, jelly, film)
5 Birth control injection (Deprovera)
6 Nothing
7 Other - Specify

If SXB_Q13 = 7, go to SXB_Q13S.
Otherwise, go to SXB_END.

INTERVIEWER: Specify.

Specify (80 spaces)

If SXB_Q13 = 7, go to SXB_Q13S.
Otherwise, go to SXB_END.
Psychological well-being (PWB)

PWB_BEG

PWB_C1 If (do PWB block = 2), go to PWB_END. Otherwise, go to PWB_C2.

PWB_C2 If proxy interview, go to PWB_END. Otherwise, go to PWB_R1.

PWB_R1 Now I’m going to read you a series of statements that people might use to describe themselves. Please tell me if you had these feelings almost always, frequently, half the time, rarely or never.

INTERVIEWER: Press <Enter> to continue.

PWB_Q01 During the past month, you felt self-confident.

INTERVIEWER: Read categories to respondent.

1 Almost always
2 Frequently
3 Half the time
4 Rarely
5 Never

PWB_Q02 During the past month, you felt satisfied with what you were able to accomplish, you felt proud of yourself.

INTERVIEWER: Read categories to respondent.

1 Almost always
2 Frequently
3 Half the time
4 Rarely
5 Never

PWB_Q03 (During the past month,) you were a “go-getter ”, you took on lots of projects.

INTERVIEWER: Read categories to respondent.

1 Almost always
2 Frequently
3 Half the time
4 Rarely
5 Never

PWB_C04 If (PWB_Q01 = DK or R and PWB_Q02 = DK or R and PWB_Q03 = DK or R), go to PWB_END. Otherwise, go to PWB_Q04.

PWB_Q04 (During the past month,) you felt emotionally balanced.

INTERVIEWER: Read categories to respondent.

1 Almost always
2 Frequently
3 Half the time
4 Rarely
5 Never

DK, R

Optional Content selected by health regions in: New Brunswick
PWB_Q05 (During the past month,) you felt loved and appreciated.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

DK, R

PWB_Q06 (During the past month,) you had goals and ambitions.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

DK, R

PWB_Q07 (During the past month,) you felt like having fun, participating in sports and all your favourite activities and hobbies.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

DK, R

PWB_Q08 During the past month, you felt useful.

INTERVIEWER: Read categories to respondent.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

DK, R

PWB_Q09 (During the past month,) you smiled easily.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

DK, R

PWB_Q10 (During the past month,) you were true to yourself, being natural at all times.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

DK, R
(During the past month,) you did a good job of listening to your friends.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

(During the past month,) you were curious and interested in all sorts of things.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

(During the past month,) you were able to clearly sort things out when faced with complicated situations.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

(During the past month,) you found life exciting and you wanted to enjoy every moment of it.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

(During the past month,) your life was well-balanced between your family, personal and professional activities.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

During the past month, you were quite calm and level-headed.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never

INTERVIEWER: Read categories to respondent.
PWB_Q17 | (During the past month,) you were able to easily find answers to your problems.
--- | ---
1 | Almost always
2 | Frequently
3 | Half the time
4 | Rarely
5 | Never
DK, R

PWB_Q18 | (During the past month,) you got along well with everyone around you.
--- | ---
1 | Almost always
2 | Frequently
3 | Half the time
4 | Rarely
5 | Never
DK, R

PWB_Q19 | (During the past month,) you lived at a normal pace, not doing anything excessively.
--- | ---
1 | Almost always
2 | Frequently
3 | Half the time
4 | Rarely
5 | Never
DK, R

PWB_Q20 | (During the past month,) you had the impression of really enjoying life.
--- | ---
1 | Almost always
2 | Frequently
3 | Half the time
4 | Rarely
5 | Never
DK, R

PWB_Q21 | (During the past month,) you had a good sense of humour, easily making your friends laugh.
--- | ---
1 | Almost always
2 | Frequently
3 | Half the time
4 | Rarely
5 | Never
DK, R

PWB_Q22 | (During the past month,) you felt good, at peace with yourself.
--- | ---
1 | Almost always
2 | Frequently
3 | Half the time
4 | Rarely
5 | Never
DK, R
(During the past month,) you felt healthy and in good shape.

1  Almost always
2  Frequently
3  Half the time
4  Rarely
5  Never
DK, R

(During the past month,) you were able to face difficult situations in a positive way.

1  Almost always
2  Frequently
3  Half the time
4  Rarely
5  Never
DK, R

(During the past month,) your morale was good.

1  Almost always
2  Frequently
3  Half the time
4  Rarely
5  Never
DK, R
Social support - Availability (SSA)

SSA_BEG

SSA_C1 If (do SSA block = 1), go to SSA_C2.
SSAFOPT Otherwise, go to SSA_END.

SSA_C2 If proxy interview, go to SSA_END.
Otherwise, go to SSA_R1.

SSA_R1 Next are some questions about the support that is available to you.
INTERVIEWER: Press <Enter> to continue.

SSA_Q01 Starting with a question on friendship, about how many close friends and close relatives do you have, that is, people you feel at ease with and can talk to about what is on your mind?

<table>
<thead>
<tr>
<th></th>
<th>Close friends</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(MIN: 0) (MAX: 99; warning after 20)</td>
</tr>
</tbody>
</table>

DK, R  (Go to SSA_END)

SSA_R2 People sometimes look to others for companionship, assistance or other types of support.
INTERVIEWER: Press <Enter> to continue.

SSA_Q02 How often is each of the following kinds of support available to you if you need it:

<table>
<thead>
<tr>
<th></th>
<th>someone to help you if you were confined to bed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>None of the time</td>
</tr>
<tr>
<td>2</td>
<td>A little of the time</td>
</tr>
<tr>
<td>3</td>
<td>Some of the time</td>
</tr>
<tr>
<td>4</td>
<td>Most of the time</td>
</tr>
<tr>
<td>5</td>
<td>All of the time</td>
</tr>
</tbody>
</table>

DK, R  (Go to SSA_END)

Note:  If SSA_Q02 = 2, 3, 4 or 5 then KEY_PHRASES21A = “to help you if you were confined to bed”.

SSA_Q03 (How often is each of the following kinds of support available to you if you need it:)

<table>
<thead>
<tr>
<th></th>
<th>someone you can count on to listen to you when you need to talk?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>None of the time</td>
</tr>
<tr>
<td>2</td>
<td>A little of the time</td>
</tr>
<tr>
<td>3</td>
<td>Some of the time</td>
</tr>
<tr>
<td>4</td>
<td>Most of the time</td>
</tr>
<tr>
<td>5</td>
<td>All of the time</td>
</tr>
</tbody>
</table>

DK, R

Note:  If SSA_Q03 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to listen to you”.

Optional Content selected by health regions in: Nova Scotia, Quebec, British Columbia, Yukon and Nunavut.
SSA_Q04 (How often is each of the following kinds of support available to you if you need it:)

... someone to give you advice about a crisis?

1 None of the time
2 A little of the time
3 Some of the time
4 Most of the time
5 All of the time

DK, R

Note: If SSA_Q04 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to give you advice”.

SSA_Q05 (How often is each of the following kinds of support available to you if you need it:)

... someone to take you to the doctor if you needed it?

1 None of the time
2 A little of the time
3 Some of the time
4 Most of the time
5 All of the time

DK, R

Note: If SSA_Q05 = 2, 3, 4 or 5 then KEY_PHRASES21A = “to take you to the doctor”.

SSA_Q06 (How often is each of the following kinds of support available to you if you need it:)

... someone who shows you love and affection?

1 None of the time
2 A little of the time
3 Some of the time
4 Most of the time
5 All of the time

DK, R

Note: If SSA_Q06 = 2, 3, 4 or 5 then KEY_PHRASES22A = “to show you affection”.

SSA_Q07 (Again, how often is each of the following kinds of support available to you if you need it:)

... someone to have a good time with?

1 None of the time
2 A little of the time
3 Some of the time
4 Most of the time
5 All of the time

DK, R

Note: If SSA_Q07 = 2, 3, 4 or 5 then KEY_PHRASES23A = “to have a good time with”.
(How often is each of the following kinds of support available to you if you need it:)

... someone to give you information in order to help you understand a situation?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q08 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to give you information”.

(How often is each of the following kinds of support available to you if you need it:)

... someone to confide in or talk to about yourself or your problems?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q09 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to confide in”.

(How often is each of the following kinds of support available to you if you need it:)

... someone who hugs you?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q10 = 2, 3, 4 or 5 then KEY_PHRASES22A = “to hug you”.

(How often is each of the following kinds of support available to you if you need it:)

... someone to get together with for relaxation?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q11 = 2, 3, 4 or 5 then KEY_PHRASE23A = “to relax with”. 

---

Canadian Community Health Survey, 2008 Questionnaire, 198
SSA_Q12 (How often is each of the following kinds of support available to you if you need it:)

… someone to prepare your meals if you were unable to do it yourself?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q12 = 2, 3, 4 or 5 then KEY_PHRASES21A = “to prepare your meals”.

SSA_Q13 (How often is each of the following kinds of support available to you if you need it:)

… someone whose advice you really want?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q13 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to advise you”.

SSA_Q14 (How often is each of the following kinds of support available to you if you need it:)

… someone to do things with to help you get your mind off things?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q14 = 2, 3, 4 or 5 then KEY_PHRASES23A = “to do things with”.

SSA_Q15 (How often is each of the following kinds of support available to you if you need it:)

… someone to help with daily chores if you were sick?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

Note: If SSA_Q15 = 2, 3, 4 or 5 then KEY_PHRASES21A = “to help with daily chores”.
SSA_Q16
(How often is each of the following kinds of support available to you if you need it?)

... someone to share your most private worries and fears with?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

DK, R

Note:  If SSA_Q16 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to share your worries and fears with”.

SSA_Q17
(How often is each of the following kinds of support available to you if you need it?)

... someone to turn to for suggestions about how to deal with a personal problem?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

DK, R

Note:  If SSA_Q17 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to turn to for suggestions”.

SSA_Q18
(How often is each of the following kinds of support available to you if you need it?)

... someone to do something enjoyable with?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

DK, R

Note:  If SSA_Q18 = 2, 3, 4 or 5 then KEY_PHRASES23A = “to do something enjoyable with”.

SSA_Q19
(How often is each of the following kinds of support available to you if you need it?)

... someone who understands your problems?

1  None of the time
2  A little of the time
3  Some of the time
4  Most of the time
5  All of the time

DK, R

Note:  If SSA_Q19 = 2, 3, 4 or 5 then KEY_PHRASES24A = “to understand your problems”.

Canadian Community Health Survey, 2008 Questionnaire, 200
**SSA_Q20** *(How often is each of the following kinds of support available to you if you need it:)*

... someone to love you and make you feel wanted?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>None of the time</td>
</tr>
<tr>
<td>2</td>
<td>A little of the time</td>
</tr>
<tr>
<td>3</td>
<td>Some of the time</td>
</tr>
<tr>
<td>4</td>
<td>Most of the time</td>
</tr>
<tr>
<td>5</td>
<td>All of the time</td>
</tr>
</tbody>
</table>

DK, R

Note: If SSA_Q20 = 2, 3, 4 or 5 then KEY_PHRASES22A = “to love you and make you feel wanted”.

**SSA_END**
Social support - Utilization (SSU)

SSU_BEG

SSU_C1 If (do SSU block = 1), go to SSU_C2. Otherwise, go to SSU_END.

SSU_C2 If proxy interview, go to SSU_END. Otherwise, go to SSU_C3.

SSU_C3 If any responses of 2, 3, 4 or 5 in SSA_Q02 to SSA_Q20, go to SSU_R1. Otherwise, go to SSU_END.

SSU_R1 You have just mentioned that if you needed support, someone would be available for you. The next questions are about the support or help you actually received in the past 12 months.

INTERVIEWER: Press <Enter> to continue.

SSU_C21 If any responses of 2, 3, 4 or 5 in SSA_Q02 or SSA_Q05 or SSA_Q12 or SSA_Q15, then SSU_C21 = 1 (Yes) and go to SSU_Q21A. Otherwise, SSU_C21=2 (No) and go to SSU_C22.

Note: If SSA_Q02 = 2, 3, 4, 5 use “to help you if you were confined to bed” in SSU_Q21A. If SSA_Q05 = 2, 3, 4, 5 use “to take you to the doctor” in SSU_Q21A. If SSA_Q12 = 2, 3, 4, 5 use “to prepare your meals” in SSU_Q21A. If SSA_Q15= 2, 3, 4, 5 use “to help with daily chores” in SSU_Q21A.

SSU_Q21A In the past 12 months, did you receive the following support:

… someone ^KEY_PHRASES21A?

1 Yes
2 No (Go to SSU_C22)
DK, R (Go to SSU_C22)

Note: (^KEY_PHRASES for all positive answers (2, 3, 4 and 5) of questions SSA_Q02, SSA_Q05, SSA_Q12, SSA_Q15; If SSA_Q02 = 2, 3, 4 or 5 show ^PHRASE from SSA_C02 always in the 1st place; If 1 PHRASE, show 1st ^PHRASE in lowercase: ^PHRASE1; If 2 PHRASES, show 1st two ^PHRASES in lowercase, ^PHRASE1 and ^PHRASE2; If 3 or more PHRASES, show in lowercase: ^PHRASE1, ^PHRASE2 and ^PHRASE3).

SSU_Q21B When you needed it, how often did you receive this kind of support (in the past 12 months)?

INTERVIEWER: Read categories to respondent.

1 Almost always
2 Frequently
3 Half the time
4 Rarely
5 Never
DK, R

SSU_C22 If any responses of 2, 3, 4 or 5 in SSA_Q06 or SSA_Q10 or SSA_Q20 then SSU_C22= 1 (Yes) and go to SSU_Q22A. Otherwise, SSU_C22=2 (No) and go to SSU_C23.

Note: If SSA_Q06 = 2, 3, 4, 5 use “to show you affection” in SSU_Q22A. If SSA_Q10 = 2, 3, 4, 5 use “to hug you” in SSU_Q22A. If SSA_Q20 = 2, 3, 4, 5 use “to love you and make you feel wanted” in SSU_Q22A.
SSU_Q22A  (In the past 12 months, did you receive the following support:)

SSU_22A  … someone ^KEY_PHRASES22A?

1  Yes
2  No   (Go to SSU_C23)
DK, R  (Go to SSU_C23)

Note: (^KEY_PHRASES for all positive answers (2, 3, 4 and 5) of questions SSA_Q06, SSA_Q10, SSA_Q20; If 1 PHRASE, show 1st ^PHRASE in lowercase: ^PHRASE1; If 2 PHRASES, show 1st two ^PHRASES in lowercase: ^PHRASE1 and ^PHRASE2; If 3 PHRASES, show in lowercase: ^PHRASE1, ^PHRASE2 and ^PHRASE3).

SSU_Q22B  When you needed it, how often did you receive this kind of support (in the past 12 months)?

INTERVIEWER:  Read categories to respondent.

1  Almost always
2  Frequently
3  Half the time
4  Rarely
5  Never
DK, R

SSU_C23  If any responses of 2, 3, 4 or 5 in SSA_Q07 or SSA_C11 or SSA_Q14 or SSA_Q18, then SSU_C23 =1 (Yes) and go to SSU_Q23A. Otherwise, SSU_C23=2 (No) and go to SSU_C24.

Note:  If SSA_Q07 = 2, 3, 4, 5 use "to have a good time with" in SSU_Q23A. If SSA_Q11 = 2, 3, 4, 5 use "to relax with" in SSU_Q23A. If SSA_Q14 = 2, 3, 4, 5 use "to do things with" in SSU_Q23A. If SSA_Q18 = 2, 3, 4, 5 use "to do something enjoyable with" in SSU_Q23A.

SSU_Q23A  (In the past 12 months, did you receive the following support:)

SSU_23A  … someone ^KEY_PHRASES23A?

1  Yes
2  No   (Go to SSU_C24)
DK, R  (Go to SSU_C24)

Note: (^KEY_PHRASES for all positive answers (2, 3, 4 and 5) of questions SSA_Q07, SSA_Q11, SSA_Q14, SSA_Q18; If 1 PHRASE, show 1st ^PHRASE in lowercase: ^PHRASE1; If 2 PHRASES, show 1st two ^PHRASES in lowercase: ^PHRASE1 and ^PHRASE2; If 3 or more PHRASES, show in lowercase: ^PHRASE1, ^PHRASE2 and ^PHRASE3).

SSU_Q23B  When you needed it, how often did you receive this kind of support (in the past 12 months)?

INTERVIEWER:  Read categories to respondent.

1  Almost always
2  Frequently
3  Half the time
4  Rarely
5  Never
DK, R

SSU_C24  If any responses of 2, 3, 4 or 5 in SSA_Q03 or SSA_Q04 or SSA_Q08 or SSA_Q09, SSA_Q13, SSA_Q16, SSA_Q17 or SSA_Q19, then SSU_C24 =1 (Yes) and go to SSU_Q24A. Otherwise, SSU_C24=2 (No) and go to SSU_END.
Note: If SSA_Q03 = 2, 3, 4, 5 use “to listen to you” in SSU_Q24A.
If SSA_Q04 = 2, 3, 4, 5 use “to give you advice” in SSU_Q24A.
If SSA_Q08 = 2, 3, 4, 5 use “to give you information” in SSU_Q24A.
If SSA_Q09 = 2, 3, 4, 5 use “to confide in” in SSU_Q24A.
If SSA_Q13 = 2, 3, 4, 5 use “to advise you” in SSU_Q24A.
If SSA_Q16 = 2, 3, 4, 5 use “to share your worries and fears with” in SSU_Q24A.
If SSA_Q17 = 2, 3, 4, 5 use “to turn to for suggestions” in SSU_Q24A
If SSA_Q19 = 2, 3, 4, 5 use “to understand your problems” in SSU_Q24A.

SSU_Q24A  (In the past 12 months, did you receive the following support:)
SSU_24A  … someone ^KEY_PHRASES24A?

1 Yes
2 No  (Go to SSU_END)
   DK, R (Go to SSU_END)

Note: (^KEY_PHRASES for all positive answers (2, 3, 4 and 5) of questions SSA_Q03, SSA_Q04, SSA_Q08, SSA_Q09, SSA_Q13, SSA_Q16, SSA_Q17 or SSA_Q19; If SSA_Q04 and SSA_Q13 = 2, 3, 4 or 5 use only ^KEY_PHRASE SSA_C04; If 1 PHRASE, show 1st ^PHRASE in lowercase: ^PHRASE1; If 2 PHRASES, show 1st two ^PHRASES in lowercase: ^PHRASE1 and ^PHRASE2; If 3 or more PHRASES, show in lowercase: ^PHRASE1, ^PHRASE2 and ^PHRASE3).

SSU_Q24B  When you needed it, how often did you receive this kind of support (in the past 12 months)?
SSU_24B  INTERVIEWER: Read categories to respondent.

1 Almost always
2 Frequently
3 Half the time
4 Rarely
5 Never
   DK, R

SSU_END
Spiritual values (SPR)

<table>
<thead>
<tr>
<th>SPR_BEG</th>
<th>205</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPR_C1</td>
<td>If (do SPR block = 1), go to SPR_C2.</td>
</tr>
<tr>
<td>SPR_C2</td>
<td>Otherwise, go to SPR_END.</td>
</tr>
<tr>
<td>SPR_HD</td>
<td>Otherwise, go to SPR_END.</td>
</tr>
<tr>
<td>SPR_C2</td>
<td>If proxy interview, go to SPR_END.</td>
</tr>
<tr>
<td>SPR_R1</td>
<td>Otherwise, go to SPR_R1.</td>
</tr>
<tr>
<td>SPR_R1</td>
<td>I now have a few questions about spiritual values in your life.</td>
</tr>
<tr>
<td>INTERVIEWER</td>
<td>Press &lt;Enter&gt; to continue.</td>
</tr>
<tr>
<td>SPR_Q1</td>
<td>Do spiritual values play an important role in your life?</td>
</tr>
<tr>
<td>SPV_1</td>
<td>1 Yes</td>
</tr>
<tr>
<td></td>
<td>2 No (Go to SPR_Q5)</td>
</tr>
<tr>
<td></td>
<td>DK, R (Go to SPR_END)</td>
</tr>
<tr>
<td>SPR_Q2</td>
<td>To what extent do your spiritual values:</td>
</tr>
<tr>
<td>SPV_2</td>
<td>... help you to find meaning in your life?</td>
</tr>
<tr>
<td></td>
<td>INTERVIEWER: Read categories to respondent.</td>
</tr>
<tr>
<td></td>
<td>1 A lot</td>
</tr>
<tr>
<td></td>
<td>2 Some</td>
</tr>
<tr>
<td></td>
<td>3 A little</td>
</tr>
<tr>
<td></td>
<td>4 Not at all</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td>SPR_Q3</td>
<td>(To what extent do your spiritual values:)</td>
</tr>
<tr>
<td>SPV_3</td>
<td>... give you the strength to face everyday difficulties?</td>
</tr>
<tr>
<td></td>
<td>1 A lot</td>
</tr>
<tr>
<td></td>
<td>2 Some</td>
</tr>
<tr>
<td></td>
<td>3 A little</td>
</tr>
<tr>
<td></td>
<td>4 Not at all</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td>SPR_Q4</td>
<td>(To what extent do your spiritual values:)</td>
</tr>
<tr>
<td>SPV_4</td>
<td>... help you to understand the difficulties of life?</td>
</tr>
<tr>
<td></td>
<td>1 A lot</td>
</tr>
<tr>
<td></td>
<td>2 Some</td>
</tr>
<tr>
<td></td>
<td>3 A little</td>
</tr>
<tr>
<td></td>
<td>4 Not at all</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>
SPR_Q5 What, if any, is your religion?
SPV_5
1  No religion (Agnostic, Atheist)  (Go to SPR_END)
2  Roman Catholic
3  Ukrainian Catholic
4  United Church
5  Anglican (Church of England, Episcopalian)
6  Presbyterian
7  Lutheran
8  Baptist
9  Pentecostal
10 Eastern Orthodox
11 Jewish
12 Islam (Muslim)
13 Hindu
14 Buddhist
15 Sikh
16 Jehovah’s Witness
17 Other - Specify
   DK, R  (Go to SPR_END)
SPR_C5 If SPR_Q5 = 17, go to SPR_Q5S.
Otherwise, go to SPR_Q6.
SPR_Q5S INTERVIEWER: Specify.
____________________
(80 spaces)
DK, R
SPR_Q6 Not counting events such as weddings or funerals, during the past 12 months, how often
SPV_6 did you participate in religious activities or attend religious services or meetings?
INTERVIEWER: Read categories to respondent.
   Do not include special events such as weddings, funerals, baptisms, bar mitzvahs, etc.
   1  Once a week or more
   2  Once a month
   3  3 or 4 times a year
   4  Once a year
   5  Not at all
      DK, R
SPR_Q7 In general, would you say that you are:
SPV_7 INTERVIEWER: Read categories to respondent.
   1  … very religious?
   2  … religious?
   3  … not very religious?
   4  … not religious at all?
      DK, R
SPR_END
Consultations about mental health (CMH)

CMH_BEG

CMH_C01A If (CMH block = 1), go to CMH_C01B. Otherwise, go to CMH_END.

CMH_C01B If proxy interview, go to CMH_END. Otherwise, go to CMH_R01K.

CMH_R01K Now some questions about mental and emotional well-being.
INTERVIEWER: Press <Enter> to continue.

CMH_Q01K In the past 12 months, that is, from [date one year ago] to yesterday, have you seen or talked to a health professional about your emotional or mental health?
INTERVIEWER: Include both face to face and telephone contacts.

1 Yes
2 No (Go to CMH_END)
   DK, R (Go to CMH_END)

CMH_Q01L How many times (in the past 12 months)?
CMH_Q01L L L L L Times

(MIN: 1) (MAX: 366; warning after 25)
DK, R

CMH_Q01M Whom did you see or talk to?
INTERVIEWER: Read categories to respondent. Mark all that apply.

1 Family doctor or general practitioner
2 Psychiatrist
3 Psychologist
4 Nurse
5 Social worker or counsellor
6 Other – Specify
   DK, R

CMH_C01MS If CMH_Q01M = 6, go to CMH_Q01MS. Otherwise, go to CMH_E01M[1].

CMH_Q01MS INTERVIEWER: Specify.

______________________________________________
80 spaces

DK, R

CMH_E01M[1] If CMH_Q01M = 1 (saw a family medical doctor) and HCU_Q02A = 2, display edit message as follows:

Inconsistent answers have been entered. The respondent has seen or talked with a family doctor or general practitioner in the past 12 months but previously reported that he/she did not. Please confirm.

CMH_E01M[2] If CMH_Q01M = 2 (saw a psychiatrist) and HCU_Q02C = 2, display edit message.

Inconsistent answers have been entered. The respondent has seen or talked with a psychiatrist in the past 12 months but previously reported that he/she did not. Please confirm.
CMH_E01M[3] If CMH_Q01M = 3 (saw a psychologist) and HCU_Q02GA = 2, display edit message.

Inconsistent answers have been entered. The respondent has seen or talked with a psychologist in the past 12 months but previously reported that he/she did not. Please confirm.

CMH_E01M[4] If CMH_Q01M = 4 (saw a nurse) and HCU_Q02D = 2, display edit message.

Inconsistent answers have been entered. The respondent has seen or talked with a nurse in the past 12 months but previously reported that he/she did not. Please confirm.

CMH_E01M[5] If CMH_Q01M = 5 (saw a social worker or counsellor) and HCU_Q02GB = 2, display edit message.

Inconsistent answers have been entered. The respondent has seen or talked with a social worker or counsellor in the past 12 months but previously reported that he/she did not. Please confirm.

CMH_END
Distress (DIS)

DIS_BEG

If (do DIS block = 1), go to DIS_C2.

DISFOPT

Otherwise, go to DIS_END.

DIS_C2

If proxy interview, go to DIS_END.

Otherwise, go to DIS_R01.

DIS_R01

The following questions deal with feelings you may have had during the past month.

INTERVIEWER: Press <Enter> to continue.

DIS_Q01A

During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:

... tired out for no good reason?

INTERVIEWER: Read categories to respondent.

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time

DK, R (Go to DIS_END)

DIS_Q01B

During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:

... nervous?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time

DK, R (Go to DIS_Q01D)

DIS_Q01C

(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:)

... so nervous that nothing could calm you down?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time

DK, R

Note: In processing, if a respondent answered DIS_Q01B = 5 (none of the time), the variable DIS_Q01C will be given the value of 5 (none of the time).
DIS_Q01D  
(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:

...hopeless?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time

DK, R

DIS_Q01E  
(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:

...restless or fidgety?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time

(Go to DIS_Q01G)

DK, R

Note: In processing, if a respondent answered DIS_Q01E = 5 (none of the time), the variable DIS_Q01F will be given the value of 5 (none of the time).

DIS_Q01F  
(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:

...so restless you could not sit still?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time

DK, R

DIS_Q01G  
(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:

...sad or depressed?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time

(Go to DIS_Q01I)

DK, R

(Go to DIS_Q01I)
(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:)

...so depressed that nothing could cheer you up?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK, R

Note: In processing, if a respondent answered DIS_Q01G = 5 (none of the time), the variable DIS_Q01H will be given the value of 5 (none of the time).

(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:)

...that everything was an effort?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK, R

(During the past month, that is, from [date one month ago] to yesterday, about how often did you feel:)

...worthless?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK, R

If DIS_Q01B to DIS_Q01J are DK or R, go to DIS_END.

We just talked about feelings that occurred to different degrees during the past month. Taking them altogether, did these feelings occur more often in the past month than is usual for you, less often than usual or about the same as usual?

1 More often
2 Less often (Go to DIS_Q01M)
3 About the same (Go to DIS_Q01N)
4 Never have had any (Go to DIS_END)
DK, R (Go to DIS_END)

Is that a lot more, somewhat more or only a little more often than usual?

1 A lot
2 Somewhat
3 A little
DK, R

Go to DIS_Q01N
Is that a lot less, somewhat less or only a little less often than usual?

1 A lot
2 Somewhat
3 A little
DK, R

During the past month, how much did these feelings usually interfere with your life or activities?

INTERVIEWER: Read categories to respondent.

1 A lot
2 Some
3 A little
4 Not at all
DK, R
Depression (DEP)

DEP_BEG

DEP_C01 If (do DEP block = 1), go to DEP_C02.
DPSFOPT Otherwise, go to DEP_END.

DEP_C02 If proxy interview, go to DEP_END.
Otherwise, go to DEP_Q02.

DEP_Q02 During the past 12 months, was there ever a time when you felt sad, blue, or depressed for 2 weeks or more in a row?

1 Yes
2 No (Go to DEP_Q16)
   DK, R (Go to DEP_END)

DEP_Q03 For the next few questions, please think of the 2-week period during the past 12 months when these feelings were the worst. During that time, did these feelings usually last:

INTERVIEWER: Read categories to respondent.

1 ... all day long?
2 ... most of the day?
3 ... about half of the day? (Go to DEP_Q16)
4 ... less than half of a day? (Go to DEP_Q16)
   DK, R (Go to DEP_END)

DEP_Q04 How often did you feel this way during those 2 weeks?

INTERVIEWER: Read categories to respondent.

1 Every day
2 Almost every day
3 Less often (Go to DEP_Q16)
   DK, R (Go to DEP_END)

DEP_Q05 During those 2 weeks did you lose interest in most things?

1 Yes (KEY PHRASE = Losing interest)
2 No (Go to DEP_END)
   DK, R (Go to DEP_END)

DEP_Q06 Did you feel tired out or low on energy all of the time?

1 Yes (KEY PHRASE = Feeling tired)
2 No (Go to DEP_END)
   DK, R (Go to DEP_END)

DEP_Q07 Did you gain weight, lose weight or stay about the same?

1 Gained weight (KEY PHRASE = Gaining weight)
2 Lost weight (KEY PHRASE = Losing weight)
3 Stayed about the same (Go to DEP_Q09)
4 Was on a diet (Go to DEP_Q09)
   DK, R (Go to DEP_END)
DEP_Q08A About how much did you [gain/lose]?
INTERVIEWER: Enter amount only.

|___| Weight
(MIN: 1) (MAX: 99)
DK, R (Go to DEP_Q09)

Note: If DEP_Q07 = 1, use “gain”.
Otherwise, use “lose”

DEP_N08A INTERVIEWER: Was that in pounds or in kilograms?

1 Pounds
2 Kilograms
(DK, R are not allowed)

DEP_E08A An unusual value has been entered. Please confirm.

Trigger soft edit if (DEP_Q08A > 20 and DEP_N08A = 1 or DEP_Q08A > 9 and DEP_N08A = 2).

DEP_Q09 Did you have more trouble falling asleep than you usually do?

1 Yes (KEY PHRASE = Trouble falling asleep)
2 No (Go to DEP_Q11)
DK, R (Go to DEP_END)

DEP_Q10 How often did that happen?
INTERVIEWER: Read categories to respondent.

1 Every night
2 Nearly every night
3 Less often
DK, R (Go to DEP_END)

DEP_Q11 Did you have a lot more trouble concentrating than usual?

1 Yes (KEY PHRASE = Trouble concentrating)
2 No (Go to DEP_END)

DEP_Q12 At these times, people sometimes feel down on themselves, no good or worthless. Did you feel this way?

1 Yes (KEY PHRASE = Feeling down on yourself)
2 No
DK, R (Go to DEP_END)

DEP_Q13 Did you think a lot about death - either your own, someone else’s or death in general?

1 Yes (KEY PHRASE = Thoughts about death)
2 No
DK, R (Go to DEP_END)

DEP_C14 If “Yes” in DEP_Q05, DEP_Q06, DEP_Q09, DEP_Q11, DEP_Q12 or DEP_Q13, or DEP_Q07 is “gain” or “lose”, go to DEP_R14.
Otherwise, go to DEP_END.

DEP_R14 Reviewing what you just told me, you had 2 weeks in a row during the past 12 months when you were sad, blue or depressed and also had some other things like (KEY PHRASES).
INTERVIEWER: Press <Enter> to continue.
DEP_Q14
About how many weeks altogether did you feel this way during the past 12 months?

| | | Weeks
(MIN: 2 MAX: 53)

DK, R (Go to DEP_END)

DEP_C15
If DEP_Q14 > 51 weeks, go to DEP_END.

DEP_Q15
Think about the last time you felt this way for 2 weeks or more in a row. In what month was that?

1 January    7 July
2 February   8 August
3 March    9 September
4 April    10 October
5 May    11 November
6 June    12 December

DK, R

Go to DEP_END

DEP_Q16
During the past 12 months, was there ever a time lasting 2 weeks or more when you lost interest in most things like hobbies, work or activities that usually give you pleasure?

1 Yes
2 No (Go to DEP_END)

DK, R (Go to DEP_END)

DEP_Q17
For the next few questions, please think of the 2-week period during the past 12 months when you had the most complete loss of interest in things. During that 2-week period, how long did the loss of interest usually last?

INTERVIEWER: Read categories to respondent.

1 All day long
2 Most of the day
3 About half of the day (Go to DEP_END)
4 Less than half of a day (Go to DEP_END)

DK, R (Go to DEP_END)

DEP_Q18
How often did you feel this way during those 2 weeks?

INTERVIEWER: Read categories to respondent.

1 Every day
2 Almost every day
3 Less often (Go to DEP_END)

DK, R (Go to DEP_END)

DEP_Q19
During those 2 weeks did you feel tired out or low on energy all the time?

1 Yes (KEY PHRASE = Feeling tired)
2 No

DK, R (Go to DEP_END)

DEP_Q20
Did you gain weight, lose weight, or stay about the same?

1 Gained weight (KEY PHRASE = Gaining weight)
2 Lost weight (KEY PHRASE = Losing weight)
3 Stayed about the same (Go to DEP_Q22)
4 Was on a diet (Go to DEP_Q22)

DK, R (Go to DEP_END)
DEP_Q21A  About how much did you [gain/lose]?
INTERVIEWER: Enter amount only.

| | Weight
(MIN: 1) (MAX: 99)

DK, R  (Go to DEP_Q22)

Note:  If DEP_Q20 = 1, use “gain”.
Otherwise, use “lose”.

DEP_N21A  INTERVIEWER: Was that in pounds or in kilograms?

1  Pounds
2  Kilograms
(DK, R are not allowed)

DEP_E21A  An unusual value has been entered.  Please confirm.

Trigger soft edit if (DEP_Q21A > 20 and DEP_N21A = 1 or DEP_Q21A > 9 and DEP_N21A = 2).

DEP_Q22  Did you have more trouble falling asleep than you usually do?

1  Yes  (KEY PHRASE = Trouble falling asleep)
2  No  (Go to DEP_Q24)

DK, R  (Go to DEP_END)

DEP_Q23  How often did that happen?
INTERVIEWER: Read categories to respondent.

1  Every night
2  Nearly every night
3  Less often

DK, R  (Go to DEP_END)

DEP_Q24  Did you have a lot more trouble concentrating than usual?

1  Yes  (KEY PHRASE = Trouble concentrating)
2  No
DK, R  (Go to DEP_END)

DEP_Q25  At these times, people sometimes feel down on themselves, no good, or worthless. Did you feel this way?

1  Yes  (KEY PHRASE = Feeling down on yourself)
2  No
DK, R  (Go to DEP_END)

DEP_Q26  Did you think a lot about death - either your own, someone else’s, or death in general?

1  Yes  (KEY PHRASE = Thoughts about death)
2  No
DK, R  (Go to DEP_END)

DEP_C27  If any “Yes” in DEP_Q19, DEP_Q22, DEP_Q24, DEP_Q25 or DEP_Q26, or DEP_Q20 is “gain” or “lose”, go to DEP_R27.
Otherwise, go to DEP_END.

DEP_R27  Reviewing what you just told me, you had 2 weeks in a row during the past 12 months when you lost interest in most things and also had some other things like (KEY PHRASES).

INTERVIEWER: Press <Enter> to continue.

Canadian Community Health Survey, 2008 Questionnaire, 216
DEP_Q27  About how many weeks did you feel this way during the past 12 months?
DPS_27

[ ]  [ ]  Weeks
(MIN: 2  MAX: 53)
DK, R  (Go to DEP_END)

DEP_C28  If DEP_Q27 > 51, go to DEP_END.
Otherwise, go to DEP_Q28.

DEP_Q28  Think about the last time you had 2 weeks in a row when you felt this way.
In what month was that?
DPS_28

1  January  7  July
2  February  8  August
3  March  9  September
4  April  10  October
5  May  11  November
6  June  12  December

DK, R

DEP_END
Suicidal thoughts and attempts (SUI)

SUI_BEG

If (do SUI block = 2), go to SUI_END.
Otherwise, go to SUI_C1B.

SUI_C1B
If proxy interview or if age < 15, go to SUI_END.
Otherwise, go to SUI_R1.

SUI_R1
The following questions relate to the sensitive issue of suicide.
INTERVIEWER: Press <Enter> to continue.

SUI_Q1
Have you ever seriously considered committing suicide or taking your own life?
1 Yes
2 No (Go to SUI_END)
   DK, R (Go to SUI_END)

SUI_Q2
Has this happened in the past 12 months?
1 Yes
2 No (Go to SUI_END)
   DK, R (Go to SUI_END)

SUI_Q3
Have you ever attempted to commit suicide or tried taking your own life?
1 Yes
2 No (Go to SUI_END)
   DK, R (Go to SUI_END)

SUI_Q4
Did this happen in the past 12 months?
1 Yes
2 No (Go to SUI_END)
   DK, R (Go to SUI_END)

SUI_Q5
Did you see or talk to a health professional following your attempt to commit suicide?
INTERVIEWER: Include both face to face and telephone contacts.
1 Yes
2 No (Go to SUI_END)
   DK, R (Go to SUI_END)

SUI_Q6
Whom did you see or talk to?
INTERVIEWER: Read categories to respondent. Mark all that apply.
1 Family doctor or general practitioner
2 Psychiatrist
3 Psychologist
4 Nurse
5 Social worker or counsellor
6 Religious or spiritual advisor such as a priest, chaplain or rabbi
7 Teacher or guidance counsellor
8 Other
   DK, R

SUI_END
SFR_BEG
If (do SFR block = 1), go to SFR_R03A.
Otherwise, go to SFR_END.

SFR_R03A
Although some of the following questions may seem repetitive, the next section deals with another way of measuring health status.

INTERVIEWER: Press <Enter> to continue.

SFR_R03B
The questions are about how ^YOU2 [feel/feels] and how well ^YOU1 ^ARE able to do ^YOUR1 usual activities.

INTERVIEWER: Press <Enter> to continue.

Note: If interview is non-proxy, use “feel”. Otherwise, use “feels”.

SFR_Q03
I’ll start with a few questions concerning activities ^YOU2 might do during a typical day. Does ^YOUR1 health limit ^HIMHER in any of the following activities:

… in vigorous activities, such as running, lifting heavy objects, or participating in strenuous sports?

INTERVIEWER: Read categories to respondent.

1 Limited a lot
2 Limited a little
3 Not at all limited
DK, R (Go to SFR_END)

SFR_Q04
(Does ^YOUR1 health limit ^HIMHER:)

… in moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf?

INTERVIEWER: Read categories to respondent.

1 Limited a lot
2 Limited a little
3 Not at all limited
DK, R

SFR_Q05
(Does ^YOUR1 health limit ^HIMHER:)

… in lifting or carrying groceries?

1 Limited a lot
2 Limited a little
3 Not at all limited
DK, R

SFR_Q06
(Does ^YOUR1 health limit ^HIMHER:)

… in climbing several flights of stairs?

1 Limited a lot
2 Limited a little
3 Not at all limited
DK, R
SFR_07
(Does ^YOUR1 health limit ^HIMHER:

... in climbing **one** flight of stairs?

1  Limited a lot
2  Limited a little
3  Not at all limited
DK, R

SFR_08
(Does ^YOUR1 health limit ^HIMHER:

... in bending, kneeling, or stooping?

1  Limited a lot
2  Limited a little
3  Not at all limited
DK, R

SFR_09
(Does ^YOUR1 health limit ^HIMHER:

... in walking **more than one kilometre**?

1  Limited a lot
2  Limited a little
3  Not at all limited
DK, R

SFR_10
(Does ^YOUR1 health limit ^HIMHER:

... in walking **several blocks**?

1  Limited a lot
2  Limited a little
3  Not at all limited
DK, R

SFR_11
(Does ^YOUR1 health limit ^HIMHER:

... in walking **one block**?

1  Limited a lot
2  Limited a little
3  Not at all limited
DK, R

SFR_12
(Does ^YOUR1 health limit ^HIMHER:

... in bathing and dressing ^YOURSELF?

1  Limited a lot
2  Limited a little
3  Not at all limited
DK, R
Now a few questions about problems with your work or with other regular daily activities. Because of your physical health, during the past 4 weeks, did you:

... cut down on the amount of time you spent on work or other activities?

1  Yes
2  No
DK, R

Because of your physical health, during the past 4 weeks, did you:

... accomplish less than you would like?

1  Yes
2  No
DK, R

(Because of your physical health, during the past 4 weeks,) were you:

... limited in the kind of work or other activities?

1  Yes
2  No
DK, R

(Because of your physical health, during the past 4 weeks,) did you:

... have difficulty performing the work or other activities (for example, it took extra effort)?

1  Yes
2  No
DK, R

Next a few questions about problems with your work or with other regular daily activities due to emotional problems (such as feeling depressed or anxious). Because of emotional problems, during the past 4 weeks, did you:

... cut down on the amount of time you spent on work or other activities?

1  Yes
2  No
DK, R (Go to SFR_END)

Because of emotional problems, during the past 4 weeks, did you:

... accomplish less than you would like?

1  Yes
2  No
DK, R

(Because of emotional problems, during the past 4 weeks,) did you:

... not do work or other activities as carefully as usual?

1  Yes
2  No
DK, R
During the past 4 weeks, how much has ^YOUR1 physical health or emotional problems interfered with ^YOUR1 normal social activities with family, friends, neighbours, or groups?

INTERVIEWER: Read categories to respondent.

1   Not at all
2   A little bit
3   Moderately
4   Quite a bit
5   Extremely
   DK, R

During the past 4 weeks, how much bodily pain ^HAVE ^YOU1 had?

INTERVIEWER: Read categories to respondent.

1   None
2   Very mild
3   Mild
4   Moderate
5   Severe
6   Very severe
   DK, R

During the past 4 weeks, how much did pain interfere with ^YOUR1 normal work (including work both outside the home and housework)?

INTERVIEWER: Read categories to respondent.

1   Not at all
2   A little bit
3   Moderately
4   Quite a bit
5   Extremely
   DK, R

The next questions are about how ^YOU2 felt and how things have been with ^HIMHER during the past 4 weeks. For each question, please indicate the answer that comes closest to the way ^YOU2 ^HAVE been feeling.

INTERVIEWER: Press <Enter> to continue.

During the past 4 weeks, how much of the time:

… did ^YOU2 feel full of pep?

INTERVIEWER: Read categories to respondent.

1   All of the time
2   Most of the time
3   A good bit of the time
4   Some of the time
5   A little of the time
6   None of the time
   DK, R
SFR_Q24
(During the past 4 weeks, how much of the time:)
... ^HAVE ^YOU2 been a very nervous person?
INTERVIEWER: Read categories to respondent.
1  All of the time
2  Most of the time
3  A good bit of the time
4  Some of the time
5  A little of the time
6  None of the time
DK, R

SFR_Q25
(During the past 4 weeks, how much of the time:)
... ^HAVE ^YOU1 felt so down in the dumps that nothing could cheer ^HIMHER up?
1  All of the time
2  Most of the time
3  A good bit of the time
4  Some of the time
5  A little of the time
6  None of the time
DK, R

SFR_Q26
(During the past 4 weeks, how much of the time:)
... ^HAVE ^YOU1 felt calm and peaceful?
1  All of the time
2  Most of the time
3  A good bit of the time
4  Some of the time
5  A little of the time
6  None of the time
DK, R

SFR_Q27
(During the past 4 weeks, how much of the time:)
... did ^YOU1 have a lot of energy?
1  All of the time
2  Most of the time
3  A good bit of the time
4  Some of the time
5  A little of the time
6  None of the time
DK, R

SFR_Q28
During the past 4 weeks, how much of the time:
... ^HAVE ^YOU1 felt downhearted and blue?
1  All of the time
2  Most of the time
3  A good bit of the time
4  Some of the time
5  A little of the time
6  None of the time
DK, R
(During the past 4 weeks, how much of the time:)

**SFR_Q29**

... did ^YOU1 feel worn out?

1. All of the time
2. Most of the time
3. A good bit of the time
4. Some of the time
5. A little of the time
6. None of the time

DK, R

---

(During the past 4 weeks, how much of the time:)

**SFR_Q30**

... ^HAVE ^YOU1 been a happy person?

1. All of the time
2. Most of the time
3. A good bit of the time
4. Some of the time
5. A little of the time
6. None of the time

DK, R

---

(During the past 4 weeks, how much of the time:)

**SFR_Q31**

... did ^YOU1 feel tired?

1. All of the time
2. Most of the time
3. A good bit of the time
4. Some of the time
5. A little of the time
6. None of the time

DK, R

---

**SFR_Q32**

During the past 4 weeks, how much of the time has ^YOUR1 health limited ^YOUR1 social activities (such as visiting with friends or close relatives)?

1. All of the time
2. Most of the time
3. A good bit of the time
4. Some of the time
5. A little of the time
6. None of the time

DK, R

---

**SFR_Q33**

Now please tell me the answer that best describes how true or false each of the following statements is for ^YOU2.

[I/FNAME] [seem/seems] to get sick a little easier than other people.

**INTERVIEWER:** Read categories to respondent.

1. Definitely true
2. Mostly true
3. Not sure
4. Mostly false
5. Definitely false

DK, R
Note: If interview non-proxy, use “I” and “seem”. Otherwise, use “FNAME” and “seems”.

SFR_Q34
SFR_34

(Please tell me the answer that best describes how true or false each of the following statements is for YOU2.)

[I/FNAME] [am/is] as healthy as anybody [I/he/she] [know/knows].

INTERVIEWER: Read categories to respondent.

1  Definitely true
2  Mostly true
3  Not sure
4  Mostly false
5  Definitely false
DK, R

Note: If interview non-proxy, use “I”, “am”, “I” and “know”. If interview proxy and sex = male, use “FNAME”, “is”, “he” and “knows”. Otherwise, use “FNAME”, “is”, “she” and “knows”.

SFR_Q35
SFR_35

(Please tell me the answer that best describes how true or false each of the following statements is for YOU2.)

[I/FNAME] [expect/expects] [my/his/her] health to get worse.

1  Definitely true
2  Mostly true
3  Not sure
4  Mostly false
5  Definitely false
DK, R

Note: If interview non-proxy, use “I”, “expect”, and “my”. If proxy interview and sex = male, use “FNAME”, “expects” and “his”. Otherwise, use “FNAME”, “expects” and “her”.

SFR_Q36
SFR_36

(Please tell me the answer that best describes how true or false each of the following statements is for YOU2.)

[My/FNAME’s] health is excellent.

1  Definitely true
2  Mostly true
3  Not sure
4  Mostly false
5  Definitely false
DK, R

Note: If interview non-proxy, use “My”. Otherwise, use “FNAME’s”.

SFR_END
Access to health care services (ACC)

ACC_BEG

If (do ACC block = 1), go to ACC_C2.
Otherwise, go to ACC_END.

ACCFOPT

If proxy interview or if age < 15, go to ACC_END.
Otherwise, go to ACC_R10.

ACC_R10

The next questions are about the use of various health care services.

I will start by asking about your experiences getting health care from a medical specialist such as a cardiologist, allergist, gynaecologist or psychiatrist (excluding an optometrist).

INTERVIEWER: Press <Enter> to continue.

ACC_Q10

In the past 12 months, did you require a visit to a medical specialist for a diagnosis or a consultation?

1  Yes
2  No (Go to ACC_R20)
   DK, R (Go to ACC_R20)

ACC_Q11

In the past 12 months, did you ever experience any difficulties getting the specialist care you needed for a diagnosis or consultation?

1  Yes
2  No (Go to ACC_R20)
   DK, R (Go to ACC_R20)

ACC_Q12

What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

ACC_12A 1 Difficulty getting a referral
ACC_12B 2 Difficulty getting an appointment
ACC_12C 3 No specialists in the area
ACC_12D 4 Waited too long - between booking appointment and visit
ACC_12E 5 Waited too long - to see the doctor (i.e. in-office waiting)
ACC_12F 6 Transportation - problems
ACC_12G 7 Language - problem
ACC_12H 8 Cost
ACC_12I 9 Personal or family responsibilities
ACC_12J 10 General deterioration of health
ACC_12K 11 Appointment cancelled or deferred by specialist
ACC_12L 12 Still waiting for visit
ACC_12M 13 Unable to leave the house because of a health problem
ACC_12N 14 Other - Specify
   DK, R

ACC_C12S If ACC_Q12 = 14, go to ACC_Q12S.
Otherwise, go to ACC_R20.

ACC_Q12S

INTERVIEWER: Specify.

___________________________
(80 spaces)
DK, R
The following questions are about any surgery not provided in an emergency that you may have required, such as cardiac surgery, joint surgery, caesarean sections and cataract surgery, excluding laser eye surgery.

INTERVIEWER: Press <Enter> to continue.

**ACC_Q20**
In the past 12 months, did you require any non-emergency surgery?

1 Yes
2 No (Go to ACC_R30)
DK, R (Go to ACC_R30)

**ACC_Q21**
In the past 12 months, did you ever experience any difficulties getting the surgery you needed?

1 Yes
2 No (Go to ACC_R30)
DK, R (Go to ACC_R30)

**ACC_Q22**
What type of difficulties did you experience?
INTERVIEWER: Mark all that apply.

**ACC_22A** 1 Difficulty getting an appointment with a surgeon
**ACC_22B** 2 Difficulty getting a diagnosis
**ACC_22C** 3 Waited too long - for a diagnostic test
**ACC_22D** 4 Waited too long - for a hospital bed to become available
**ACC_22E** 5 Waited too long - for surgery
**ACC_22F** 6 Service not available - in the area
**ACC_22G** 7 Transportation - problems
**ACC_22H** 8 Language - problem
**ACC_22I** 9 Cost
**ACC_22J** 10 Personal or family responsibilities
**ACC_22K** 11 General deterioration of health
**ACC_22L** 12 Appointment canceled or deferred by surgeon or hospital
**ACC_22M** 13 Still waiting for surgery
**ACC_22N** 14 Unable to leave the house because of a health problem
**ACC_22O** 15 Other - Specify
DK, R

**ACC_C22S** If ACC_Q22 = 15, go to ACC_Q22S. Otherwise, go to ACC_R30.

**ACC_Q22S**
INTERVIEWER: Specify.

___________________________
(80 spaces)
DK, R

**ACC_R30**
Now some questions about MRIs, CAT Scans and angiographies provided in a non-emergency situation.
INTERVIEWER: Press <Enter> to continue.

**ACC_Q30**
In the past 12 months, did you require one of these tests?

1 Yes
2 No (Go to ACC_R40)
DK, R (Go to ACC_R40)
ACC_Q31 In the past 12 months, did you ever experience any difficulties getting the tests you needed?

1 Yes
2 No (Go to ACC_R40)
  DK, R (Go to ACC_R40)

ACC_Q32 What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

ACC_32A  1 Difficulty getting a referral
ACC_32B  2 Difficulty getting an appointment
ACC_32C  3 Waited too long - to get an appointment
ACC_32D  4 Waited too long - to get test (i.e. in-office waiting)
ACC_32E  5 Service not available - at time required
ACC_32F  6 Service not available - in the area
ACC_32G  7 Transportation - problems
ACC_32H  8 Language - problem
ACC_32I  9 Cost
ACC_32J 10 General deterioration of health
ACC_32K 11 Did not know where to go (i.e. information problems)
ACC_32L 12 Still waiting for test
ACC_32M 13 Unable to leave the house because of a health problem
ACC_32N 14 Other - Specify
  DK, R

ACC_C32S If ACC_Q32 = 14, go to ACC_Q32S.
Otherwise, go to ACC_R40.

ACC_Q32S INTERVIEWER: Specify.

___________________________
(80 spaces)
  DK, R

ACC_R40 Now I'd like you to think about yourself and family members living in your dwelling.
The next questions are about your experiences getting health information or advice when you needed them for yourself or a family member living in your dwelling.

INTERVIEWER: Press <Enter> to continue.

ACC_Q40 In the past 12 months, have you required health information or advice for yourself or a family member?

1 Yes
2 No (Go to ACC_R50)
  DK, R (Go to ACC_R50)

ACC_Q40A Who did you contact when you needed health information or advice for yourself or a family member?

INTERVIEWER: Read categories to respondent. Mark all that apply.

ACC_40A  1 Doctor's office
ACC_40B  2 Community health centre / CLSC
ACC_40C  3 Walk-in clinic
ACC_40D  4 Telephone health line (e.g., HealthLinks, Telehealth Ontario, HealthLink, Health-Line, TeleCare, Info-Santé)
ACC_40E  5 Hospital emergency room
ACC_40F  6 Other hospital service
ACC_40G  7 Other - Specify
ACC_C40AS If ACC_Q40A = 7, go to ACC_C40AS. Otherwise, go to ACC_Q41.

ACC_Q40AS INTERVIEWER: Specify.

(80 spaces)
DK, R

ACC_Q41 In the past 12 months, did you ever experience any difficulties getting the health information or advice you needed for yourself or a family member?

1. Yes
2. No (Go to ACC_R50)
   DK, R (Go to ACC_R50)

ACC_Q42 Did you experience difficulties during “regular” office hours (that is, 9:00 am to 5:00 pm, Monday to Friday)?

INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1. Yes
2. No    (Go to ACC_Q44)
3. Not required at this time (Go to ACC_Q44)
   DK, R     (Go to ACC_Q44)

ACC_Q43 What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

ACC_43A  1 Difficulty contacting a physician or nurse
ACC_43B  2 Did not have a phone number
ACC_43C  3 Could not get through (i.e. no answer)
ACC_43D  4 Waited too long to speak to someone
ACC_43E  5 Did not get adequate info or advice
ACC_43F  6 Language - problem
ACC_43G  7 Did not know where to go / call / uninformed
ACC_43H  8 Unable to leave the house because of a health problem
ACC_43I  9 Other - Specify
   DK, R

ACC_C43S If ACC_Q43 = 9, go to ACC_Q43S. Otherwise, go to ACC_Q44.

ACC_Q43S INTERVIEWER: Specify.

(80 spaces)
DK, R

ACC_Q44 Did you experience difficulties getting health information or advice during evenings and weekends (that is, 5:00 to 9:00 pm Monday to Friday, or 9:00 am to 5:00 pm, Saturdays and Sundays)?

INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1. Yes
2. No    (Go to ACC_Q46)
3. Not required at this time (Go to ACC_Q46)
   DK, R     (Go to ACC_Q46)
ACC_Q45  What type of difficulties did you experience?
INTERVIEWER: Mark all that apply.

ACC_45A  Difficulty contacting a physician or nurse
ACC_45B  Did not have a phone number
ACC_45C  Could not get through (i.e. no answer)
ACC_45D  Waited too long to speak to someone
ACC_45E  Did not get adequate info or advice
ACC_45F  Language - problem
ACC_45G  Did not know where to go / call / uninformed
ACC_45H  Unable to leave the house because of a health problem
ACC_45I  Other - Specify

DK, R

ACC_C45S  If ACC_Q45 = 9, go to ACC_Q45S. Otherwise, go to ACC_Q46.

ACC_Q45S  INTERVIEWER: Specify.
_________________________________________
(80 spaces)
DK, R

ACC_Q46  Did you experience difficulties getting health information or advice during the middle of the night?
INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1  Yes
2  No   (Go to ACC_R50)
3  Not required at this time (Go to ACC_R50)

DK, R   (Go to ACC_R50)

ACC_Q47  What type of difficulties did you experience?
INTERVIEWER: Mark all that apply.

ACC_47A  Difficulty contacting a physician or nurse
ACC_47B  Did not have a phone number
ACC_47C  Could not get through (i.e. no answer)
ACC_47D  Waited too long to speak to someone
ACC_47E  Did not get adequate info or advice
ACC_47F  Language - problem
ACC_47G  Did not know where to go / call / uninformed
ACC_47H  Unable to leave the house because of a health problem
ACC_47I  Other - Specify

DK, R

ACC_C47S  If ACC_Q47 = 9, go to ACC_Q47S. Otherwise, go to ACC_R50.

ACC_Q47S  INTERVIEWER: Specify.
_________________________________________
(80 spaces)
DK, R

ACC_R50  Now some questions about your experiences when you needed health care services for routine or on-going care such as a medical exam or follow-up for yourself or a family member living in your dwelling.
INTERVIEWER: Press <Enter> to continue.
Do you have a regular family doctor?

1  Yes
2  No
  DK, R

In the past 12 months, did you require any routine or on-going care for yourself or a family member?

1  Yes
2  No (Go to ACC_R60)
  DK, R (Go to ACC_R60)

In the past 12 months, did you ever experience any difficulties getting the routine or on-going care you or a family member needed?

1  Yes
2  No (Go to ACC_R60)
  DK, R (Go to ACC_R60)

Did you experience difficulties getting such care during “regular” office hours (that is, 9:00 am to 5:00 pm, Monday to Friday)?

INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1  Yes
2  No (Go to ACC_Q53)
3  Not required at this time (Go to ACC_Q54)
  DK, R (Go to ACC_Q54)

What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

 ACC_53A 1 Difficulty contacting a physician
 ACC_53B 2 Difficulty getting an appointment
 ACC_53C 3 Do not have personal / family physician
 ACC_53D 4 Waited too long - to get an appointment
 ACC_53E 5 Waited too long - to see the doctor (i.e. in-office waiting)
 ACC_53F 6 Service not available - at time required
 ACC_53G 7 Service not available - in the area
 ACC_53H 8 Transportation - problems
 ACC_53I 9 Language - problem
 ACC_53J 10 Cost
 ACC_53K 11 Did not know where to go (i.e. information problems)
 ACC_53L 12 Unable to leave the house because of a health problem
 ACC_53M 13 Other - Specify
  DK, R

If ACC_Q53 = 13, go to ACC_Q53S.
Otherwise, go to ACC_Q54.

INTERVIEWER: Specify.

___________________________
(80 spaces)
DK, R
Did you experience difficulties getting such care during evenings and weekends (that is, 5:00 to 9:00 pm, Monday to Friday or 9:00 am to 5:00 pm, Saturdays and Sundays)?

INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1  Yes
2  No   (Go to ACC_R60)
3  Not required at this time (Go to ACC_R60)

What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

ACC_55A  1 Difficulty contacting a physician
ACC_55B  2 Difficulty getting an appointment
ACC_55C  3 Do not have personal / family physician
ACC_55D  4 Waited too long - to get an appointment
ACC_55E  5 Waited too long - to see the doctor (i.e. in-office waiting)
ACC_55F  6 Service not available - at time required
ACC_55G  7 Service not available - in the area
ACC_55H  8 Transportation - problems
ACC_55I  9 Language - problem
ACC_55J 10 Cost
ACC_55K 11 Did not know where to go (i.e. information problems)
ACC_55L 12 Unable to leave the house because of a health problem
ACC_55M 13 Other - Specify

DK, R

If ACC_Q55 = 13, go to ACC_Q55S. Otherwise, go to ACC_R60.

INTERVIEWER: Specify.

(80 spaces)
DK, R

The next questions are about situations when you or a family member have needed immediate care for a minor health problem such as fever, headache, a sprained ankle, vomiting or an unexplained rash.

INTERVIEWER: Press <Enter> to continue.

In the past 12 months, have you or a family member required immediate health care services for a minor health problem?

1  Yes
2  No   (Go to ACC_END)

DK, R   (Go to ACC_END)

In the past 12 months, did you ever experience any difficulties getting the immediate care needed for a minor health problem for yourself or a family member?

1  Yes
2  No   (Go to ACC_END)

DK, R   (Go to ACC_END)
Did you experience difficulties getting such care during “regular” office hours (that is, 9:00 am to 5:00 pm, Monday to Friday)?

INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1  Yes
2  No   (Go to ACC_Q64)
3  Not required at this time (Go to ACC_Q64)
    DK, R  (Go to ACC_Q64)

What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

ACC_63A  1  Difficulty contacting a physician
ACC_63B  2  Difficulty getting an appointment
ACC_63C  3  Do not have personal / family physician
ACC_63D  4  Waited too long - to get an appointment
ACC_63E  5  Waited too long - to see the doctor (i.e. in-office waiting)
ACC_63F  6  Service not available - at time required
ACC_63G  7  Service not available - in the area
ACC_63H  8  Transportation - problems
ACC_63I  9  Language - problem
ACC_63J  10  Cost
ACC_63K  11  Did not know where to go (i.e. information problems)
ACC_63L  12  Unable to leave the house because of a health problem
ACC_63M  13  Other - Specify
    DK, R

If ACC_Q63 = 13, go to ACC_Q63S. Otherwise, go to ACC_Q64.

ACC_Q63S INTERVIEWER: Specify.

(80 spaces)
    DK, R

Did you experience difficulties getting such care during evenings and weekends (that is, 5:00 to 9:00 pm, Monday to Friday or 9:00 am to 5:00 pm, Saturdays and Sundays)?

INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1  Yes
2  No   (Go to ACC_Q66)
3  Not required at this time (Go to ACC_Q66)
    DK, R  (Go to ACC_Q66)
ACC_Q65  What type of difficulties did you experience?  
INTERVIEWER: Mark all that apply.

ACC_65A  1 Difficulty contacting a physician  
ACC_65B  2 Difficulty getting an appointment  
ACC_65C  3 Do not have personal / family physician  
ACC_65D  4 Waited too long - to get an appointment  
ACC_65E  5 Waited too long - to see the doctor (i.e. in-office waiting)  
ACC_65F  6 Service not available - at time required  
ACC_65G  7 Service not available - in the area  
ACC_65H  8 Transportation - problems  
ACC_65I  9 Language - problem  
ACC_65J 10 Cost  
ACC_65K 11 Did not know where to go (i.e. information problems)  
ACC_65L 12 Unable to leave the house because of a health problem  
ACC_65M 13 Other - Specify  
DK, R  

ACC_C65S  If ACC_Q65 = 13, go to ACC_Q65S.  
Otherwise, go to ACC_Q66.  

ACC_Q65S  INTERVIEWER: Specify.  
___________________________  
(80 spaces)  
DK, R  

ACC_Q66  Did you experience difficulties getting such care during the middle of the night?  
ACC_66  INTERVIEWER: It is important to make a distinction between “No” (Did not experience problems) and “Did not require at this time”.

1  Yes  
2  No  (Go to ACC_END)  
3 Not required at this time (Go to ACC_END)  
DK, R  (Go to ACC_END)  

ACC_Q67  What type of difficulties did you experience?  
INTERVIEWER: Mark all that apply.

ACC_67A  1 Difficulty contacting a physician  
ACC_67B  2 Difficulty getting an appointment  
ACC_67C  3 Do not have personal / family physician  
ACC_67D  4 Waited too long - to get an appointment  
ACC_67E  5 Waited too long - to see the doctor (i.e. in-office waiting)  
ACC_67F  6 Service not available - at time required  
ACC_67G  7 Service not available - in the area  
ACC_67H  8 Transportation - problems  
ACC_67I  9 Language - problem  
ACC_67J 10 Cost  
ACC_67K 11 Did not know where to go (i.e. information problems)  
ACC_67L 12 Unable to leave the house because of a health problem  
ACC_67M 13 Other - Specify  
DK, R  

ACC_C67S  If ACC_Q67 = 13, go to ACC_Q67S.  
Otherwise, go to ACC_END.
INTERVIEWER: Specify.

(80 spaces)
DK, R

ACC_END
Height and weight – Measured (MHW)

MHW_BEG

MHW_C01A If (do MHW block =1), go to MHW_C01B. Otherwise, go to MHW_END.

MHW_C01B If (proxymode =2), go to MHW_C01C. Otherwise, go to MHW_END.

MHW_C01C If area frame, go to MHW_N1A. Otherwise, go to MHW_END.

MHW_N1A INTERVIEWER: Are there any reasons that make it impossible to measure the respondent’s weight?

1 Yes
2 No (Go to MHW_R2)
DK, R not allowed

MHW_N1B INTERVIEWER: Select reasons why it is impossible to measure the respondent’s weight. Mark all that apply.

MHWZ_N1A 1 Unable to stand unassisted (go to MHW_END)
MHWZ_N1B 2 In a wheel chair (go to MHW_END)
MHWZ_N1C 3 Bedridden (go to MHW_END)
MHWZ_N1D 4 Interview setting (e.g., interview outdoors or in a public place)
MHWZ_N1E 5 Safety concerns
MHWZ_N1F 6 Has already refused to be measured
MHWZ_N1G 7 Other – Specify
DK, R not allowed

MHW_C1C If (MHW_N1B = 7), go to MHW_S1B. Otherwise, go to MHW_N5A.

MHW_S1B INTERVIEWER: Specify.

_____________________________________________(80 spaces)
DK, R not allowed.
Go to MHW_N5A.

MHW_R2 A person’s size is important in understanding health. Because of this, I would like to measure your height and weight. The measurements taken will not require any touching.
INTERVIEWER: Press <Enter> to continue.

MHW_Q2A Do I have your permission to measure your weight?

1 Yes
2 No (Go to MHW_N5A)
DK, R not allowed
MHW_N2A INTERVIEWER: Record the serial number found on the scale to be used.

| | | | | | | | | |

MHW_E2A “The serial number entered was not found in the list of valid serial numbers. Interviewer: Please confirm serial number.”

Trigger soft edit: MHW_N2A not found in list of valid serial numbers.

MHW_N2B INTERVIEWER: Record weight to the nearest 0.01 kg. If the scale does not work, or if for some other reason you cannot weigh the respondent, enter DK.

| | | | | | | | | | kilograms

(MIN: 1.00; warning under 27 kg.) (MAX: 261.00; warning above 136 kg)

DK (Go to MHW_N4)
R not allowed

MHW_N3A INTERVIEWER: Were there any articles of clothing or physical characteristics which affected the accuracy of this measurement?

1 Yes
2 No (Go to MHW_N5A)
DK, R not allowed

MHW_N3B INTERVIEWER: Select reasons affecting accuracy. Mark all that apply.

MHWZ_N3A 1 Shoes or boots
MHWZ_N3B 2 Heavy sweater or jacket
MHWZ_N3C 3 Jewellery
MHWZ_N3D 4 Other - Specify
DK, R not allowed

MHW_C3B If (MHW_N3B = 4), go to MHW_S3B.
Otherwise, go to MHW_N5A.

MHW_S3B INTERVIEWER: Specify.

_____________________________________________
(80 spaces)
DK, R not allowed

Go to MHW_N5A.

MHW_N4 INTERVIEWER: Select the reason for not weighing the respondent.

MHWZ_N4 1 Scale not functioning properly (go to MHW_N5A)
2 Other - Specify
DK, R not allowed

MHW_S4 INTERVIEWER: Specify.

_____________________________________________
(80 spaces)
DK, R not allowed
MHW_N5A INTERVIEWER: Are there any reasons that make it impossible to measure the respondent’s height?

1 Yes
2 No (Go to MHW_C6)
   DK, R not allowed

MHW_N5B INTERVIEWER: Select reasons why it is impossible to measure the respondent’s height. Mark all that apply.

MHWZ_N5A 1 Too tall
MHWZ_N5B 2 Interview setting (e.g., interview outdoors or in a public place)
MHWZ_N5C 3 Safety concerns
MHWZ_N5D 4 Has already refused to be measured
MHWZ_N5E 5 Other – Specify
   DK, R not allowed

MHW_C5B If (MHW_N5B = 5), go to MHW_S5B.
   Otherwise, go to MHW_END.

MHW_S5B INTERVIEWER: Specify.

(80 spaces)
DK, R not allowed.
Go to MHW_END

MHW_C6 If MHW_N1A=2, go to MHW_Q6A
   Otherwise, go to MHW_R6.

MHW_R6 A person’s size is important in understanding health. Because of this, I would like to measure your height. The measurement will not require any touching.
INTERVIEWER: Press <Enter> to continue.

MHW_Q6A Do I have your permission to measure your height?

1 Yes
2 No (Go to MHW_END)
   DK, R not allowed

MHW_N6B INTERVIEWER: Enter height to nearest 0.5 cm.

| | | | | | | (MIN: 90.0 cm) (MAX: 250.0 cm)
   DK, R (Go to MHW_END)

MHW_N7A INTERVIEWER: Were there any articles of clothing or physical characteristics which affected the accuracy of this measurement?

1 Yes
2 No (Go to MHW_END)
   DK, R not allowed
INTERVIEWER: Select reasons affecting accuracy. Mark all that apply.

1. Shoes or boots
2. Hairstyle
3. Hat
4. Other - Specify

DK, R not allowed

If (MHW_N7B = 4), go to MHW_S7B.
Otherwise, go to MHW_END.

INTERVIEWER: Specify.

(80 spaces)
DK, R not allowed

Go to MHW_END.
Insurance coverage (INS)

INS_BEG

INS_C1A If (do INS block = 1), go to INS_R1. Otherwise, go to INS_END.

INS_R1 Now, turning to [your/FNAME’s] insurance coverage. Please include any private, government or employer-paid plans.
INTERVIEWER: Press <Enter> to continue.

INS_Q1 [Do/Does] [you/FNAME] have insurance that covers all or part of the cost of [your/his/her] prescription medications?

1. Yes
2. No  (Go to INS_C2)
   DK  (Go to INS_C2)
   R   (Go to INS_END)

INS_Q1A Is it:
INTERVIEWER: Read categories to respondent. Mark all that apply.

INS_1A  1  ... a government-sponsored plan?
INS_1B  2  ... an employer-sponsored plan?
INS_1C  3  ... a private plan?
DK, R

INS_C2 If (do OH2 block = 1) and not a proxy interview, go to INS_Q3. Otherwise, go to INS_Q2.

INS_Q2 ([Do/Does] [you/FNAME] have insurance that covers all or part of:)

... [your/his/her] dental expenses?

1. Yes
2. No  (Go to INS_Q3)
   DK, R  (Go to INS_Q3)

INS_Q2A Is it:
INTERVIEWER: Read categories to respondent. Mark all that apply.

INS_2A  1  ... a government-sponsored plan?
INS_2B  2  ... an employer-sponsored plan?
INS_2C  3  ... a private plan?
DK, R

INS_Q3 ([Do/Does] [you/FNAME] have insurance that covers all or part of:)

... the costs of eye glasses or contact lenses?

1. Yes
2. No  (Go to INS_Q4)
   DK, R  (Go to INS_Q4)
**INS_Q3A**

**Is it:**

INTERVIEWER: Read categories to respondent. Mark all that apply.

**INS_3A**  1 ... a government-sponsored plan?
**INS_3B**  2 ... an employer-sponsored plan?
**INS_3C**  3 ... a private plan?

DK, R

**INS_Q4**

([Do/Does] [you/FNAME] have insurance that covers all or part of:)

... hospital charges for a private or semi-private room?

1 Yes
2 No (Go to INS_END)

DK, R (Go to INS_END)

**INS_Q4A**

**Is it:**

INTERVIEWER: Read categories to respondent. Mark all that apply.

**INS_4A**  1 ... a government-sponsored plan?
**INS_4B**  2 ... an employer-sponsored plan?
**INS_4C**  3 ... a private plan?

DK, R

**INS_END**
Socio-demographic characteristics (SDC)

SDC_BEG

SDC_C1 If (do SDC block = 1), go to SDC_R1. Otherwise, go to SDC_END.

SDC_R1 Now some general background questions which will help us compare the health of people in Canada.
INTERVIEWER: Press <Enter> to continue.

SDC_Q1 In what country ^WERE ^YOU1 born?

SDC_1

1 Canada (Go to SDC_Q4) 11 Jamaica
2 China 12 Netherlands / Holland
3 France 13 Philippines
4 Germany 14 Poland
5 Greece 15 Portugal
6 Guyana 16 United Kingdom
7 Hong Kong 17 United States
8 Hungary 18 Viet Nam
9 India 19 Sri Lanka
10 Italy 20 Other - Specify
DK, R (Go to SDC_Q4)

SDC_C1S If SDC_Q1 = 20, go to SDC_Q1S. Otherwise, go to SDC_Q2.

SDC_Q1S INTERVIEWER: Specify.
________________________
(80 spaces)
DK, R

SDC_Q2 ^WERE_C ^YOU1 born a Canadian citizen?

SDC_2

1 Yes (Go to SDC_Q4)
2 No (Go to SDC_Q4)
DK, R (Go to SDC_Q4)

SDC_Q3 In what year did ^YOU1 first come to Canada to live?

SDC_3 INTERVIEWER: Minimum is [year of birth]; maximum is [current year].

| | | | Year
(MIN: year of birth) (MAX: current year)
DK, R

SDC_E3 Year must be between ^Info.YearofBirth and ^Info.CurrentYear.
Trigger hard edit if SDC_Q3 < [year of birth] or SDC_Q3 > [current year].
**SDC_Q4**

To which ethnic or cultural groups did ^YOUR2 ancestors belong? (For example: French, Scottish, Chinese, East Indian)

**INTERVIEWER:** Mark all that apply. If “Canadian” is the only response, probe. If the respondent hesitates, do not suggest Canadian. If the respondent answers “Eskimo”, enter “20”.

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<table>
<thead>
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<tbody>
<tr>
<td>SDC_4A</td>
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<tr>
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<td>2</td>
<td>French</td>
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<td>English</td>
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<td>Italian</td>
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<td>SDC_4H</td>
<td>8</td>
<td>Ukrainian</td>
</tr>
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<td>SDC_4I</td>
<td>9</td>
<td>Dutch (Netherlands)</td>
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<td>Chinese</td>
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<tr>
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<td>Portuguese</td>
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<tr>
<td>SDC_4N</td>
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<td>SDC_4T</td>
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<td>Inuit</td>
</tr>
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<td>SDC_4U</td>
<td>21</td>
<td>Other – Specify</td>
</tr>
</tbody>
</table>

**SDC_C4S**

If SDC_Q4 = 21, go to SDC_Q4S. Otherwise, go to SDC_Q4_1.

**SDC_Q4S**

**INTERVIEWER:** Specify.

________________________
(80 spaces)
DK, R

**SDC_Q4_1**

^ARE_C ^YOU1 an Aboriginal person, that is, North American Indian, Métis or Inuit?

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<table>
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<tr>
<td>SDC_41</td>
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</table>

**SDC_Q4_2**

^ARE_C ^YOU1: INTERVIEWER: Read categories to respondent. Mark all that apply.

If respondent answers “Eskimo”, enter “3”.

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<table>
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<td>2</td>
</tr>
<tr>
<td>SDC_42C</td>
<td>3</td>
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</tbody>
</table>

Go to SDC_Q5
**SDC_Q4_3**

People living in Canada come from many different cultural and racial backgrounds.

^ARE_C ^YOU1:

INTERVIEWER: Read categories to respondent. Mark all that apply.

| SDC_43A | 1 | ... White? |
| SDC_43B | 2 | ... Chinese? |
| SDC_43C | 3 | ... South Asian (e.g., East Indian, Pakistani, Sri Lankan)? |
| SDC_43D | 4 | ... Black? |
| SDC_43E | 5 | ... Filipino? |
| SDC_43F | 6 | ... Latin American? |
| SDC_43G | 7 | ... Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)? |
| SDC_43H | 8 | ... Arab? |
| SDC_43I | 9 | ... West Asian (e.g., Afghan, Iranian)? |
| SDC_43J | 10 | ... Japanese? |
| SDC_43K | 11 | ... Korean? |
| SDC_43M | 12 | Other - Specify |

DK, R

**SDC_C4_3S** If SDC_Q4_3 = 12, go to SDC_Q4_3S. Otherwise, go to SDC_Q5.

**SDC_Q4_3S**

INTERVIEWER: Specify.

________________________

(80 spaces)

DK, R

**SDC_Q5**

In what languages can ^YOU1 conduct a conversation?

INTERVIEWER: Mark all that apply.

| SDC_5A | 1 | English |
| SDC_5B | 2 | French |
| SDC_5C | 3 | Arabic |
| SDC_5D | 4 | Chinese |
| SDC_5E | 5 | Cree |
| SDC_5F | 6 | German |
| SDC_5G | 7 | Greek |
| SDC_5H | 8 | Hungarian |
| SDC_5I | 9 | Italian |
| SDC_5J | 10 | Korean |
| SDC_5K | 11 | Persian (Farsi) |
| SDC_5L | 12 | Polish |
| SDC_5M | 13 | Portuguese |
| SDC_5N | 14 | Punjabi |
| SDC_5O | 15 | Spanish |
| SDC_5P | 16 | Tagalog (Filipino) |
| SDC_5Q | 17 | Ukrainian |
| SDC_5R | 18 | Vietnamese |
| SDC_5S | 19 | Dutch |
| SDC_5T | 20 | Hindi |
| SDC_5U | 21 | Russian |
| SDC_5V | 22 | Tamil |
| SDC_5W | 23 | Other – Specify |
| SDC_5L | 24 | DK, R |

**SDC_C5S** If SDC_Q5 = 23, go to SDC_Q5S. Otherwise, go to SDC_Q5A.

**SDC_Q5S**

INTERVIEWER: Specify.

________________________

(80 spaces)

DK, R
**SDC_Q5A**  
*What language ^DOVERB ^YOU1 speak most often at home?*

**INTERVIEWER:** Mark all that apply.

<table>
<thead>
<tr>
<th></th>
<th>Language</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>English</td>
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<tr>
<td>2</td>
<td>French</td>
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<td>3</td>
<td>Arabic</td>
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<td>4</td>
<td>Chinese</td>
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<td>5</td>
<td>Cree</td>
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<td>Italian</td>
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<td>10</td>
<td>Korean</td>
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<tr>
<td>11</td>
<td>Persian (Farsi)</td>
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<td>12</td>
<td>Polish</td>
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<td>Portuguese</td>
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<td>Punjabi</td>
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<td>Spanish</td>
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<td>16</td>
<td>Tagalog (Filipino)</td>
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<td>Ukrainian</td>
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<td>Vietnamese</td>
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<td>Dutch</td>
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<td>Hindi</td>
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<td>Russian</td>
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<td>22</td>
<td>Tamil</td>
</tr>
<tr>
<td>23</td>
<td>Other – Specify</td>
</tr>
</tbody>
</table>

**SDC_C5AS**  
*If SDC_Q5A = 23, go to SDC_Q5AS.*  
*Otherwise, go to SDC_Q6.*

**SDC_Q5AS**  
**INTERVIEWER:** Specify.

________________________
(80 spaces)
DK, R

**SDC_Q6**  
*What is the language that ^YOU2 first learned at home in childhood and can still understand?*

**INTERVIEWER:** Mark all that apply.

If person can no longer understand the first language learned, mark the second.

<table>
<thead>
<tr>
<th></th>
<th>Language</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>English</td>
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<td>Dutch</td>
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<td>20</td>
<td>Hindi</td>
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<tr>
<td>21</td>
<td>Russian</td>
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<tr>
<td>22</td>
<td>Tamil</td>
</tr>
<tr>
<td>23</td>
<td>Other - Specify</td>
</tr>
</tbody>
</table>

**SDC_C6S**  
*If SDC_Q6 = 23, go to SDC_Q6S.*  
*Otherwise, go to SDC_C7A.*

**SDC_Q6S**  
**INTERVIEWER:** Specify.

________________________
(80 spaces)
DK, R

**SDC_C7A**  
*If proxy interview or age < 18 or age > 59, go to SDC_END.*  
*Otherwise, go to SDC_R7A.*

**SDC_R7A**  
*Now one additional background question which will help us compare the health of people in Canada.*
Do you consider yourself to be:

1  ... heterosexual? (sexual relations with people of the opposite sex)
2  ... homosexual, that is lesbian or gay? (sexual relations with people of your own sex)
3  ... bisexual? (sexual relations with people of both sexes)

DK, R
**Canadian Community Health Survey, 2008 Questionnaire, 247**

**Education (EDU)**

**EDU_BEG**

**EDU_C01A** If (do EDU block = 1), go to EDU_C01B. Otherwise, go to EDU_END.

**EDU_C01B** If age of selected respondent < 14, go to EDU_C07A. Otherwise, go to EDU_B01.

**EDU_B01** Call Education Sub Block 1 (EDU1)

**EDU_C07A** Now I'd like you to think about the rest of your household. INTERVIEWER: Press <Enter> to continue.

**EDU_B02** Call Education Sub Block 2 (EDU2)

Note: Ask this block for each household member aged 14 and older other than selected respondent. Maximum of 19 times.

If it is a proxy interview then begin with person providing information about selected respondent. Otherwise, begin with first person rostered. Continue with household members in the order in which they were rostered.

If calling the block for the person providing the information about selected respondent, set proxyMode = NonProxy. Otherwise, set proxymode = Proxy.

**EDU_END**

**Education Sub Block 1 (EDU1)**

**EDU1_BEG**

**EDU_R01** Next, education. INTERVIEWER: Press <Enter> to continue.

**EDU_Q01** What is the highest grade of elementary or high school ^YOU2 ^HAVE ever completed?

1. Grade 8 or lower (Québec: Secondary II or lower) (Go to EDU_Q03)
2. Grade 9 – 10 (Québec: Secondary III or IV, Newfoundland and Labrador: 1st year of secondary) (Go to EDU_Q03)
3. Grade 11 – 13 (Québec: Secondary V, Newfoundland and Labrador: 2nd to 4th year of secondary) DK, R (Go to EDU_Q03)

**EDU_Q02** Did ^YOU1 graduate from high school (secondary school)?

1. Yes
2. No
3. DK, R
**EDU_Q03**

^HAVE_C ^YOU1 received any other education that could be counted towards a degree, certificate or diploma from an educational institution?

1  Yes
2  No  (Go to EDU_Q05)
DK, R (Go to EDU_Q05)

**EDU_Q04**

What is the highest degree, certificate or diploma ^YOU1 ^HAVE obtained?

1  No post-secondary degree, certificate or diploma
2  Trade certificate or diploma from a vocational school or apprenticeship training
3  Non-university certificate or diploma from a community college, CEGEP, school of nursing, etc.
4  University certificate below bachelor’s level
5  Bachelor’s degree
6  University degree or certificate above bachelor’s degree
DK, R

**EDU_Q05**

^ARE_C ^YOU1 currently attending a school, college or university?

1  Yes
2  No  (Go to EDU1_END)
DK, R (Go to EDU1_END)

**EDU_Q06**

^ARE_C ^YOU1 enrolled as a full-time student or a part-time student?

1  Full-time
2  Part-time
DK, R

**EDU1_END**

**Education Sub Block 2 (EDU2)**

**EDU2_BEG**

EDU_D07 If proxymode = NonProxy then ^YOU7 = “you” and ^YOU8=”you” and ^HAVE9_C=”Have” and ^HAVE10=”have”.

Otherwise ^YOU7 = ^FNAME and ^YOU8=he/she and ^HAVE9_C=”Has” and ^HAVE10=”has”.

**EDU_Q07**

What is the highest grade of elementary or high school ^YOU7 ever completed?

1  Grade 8 or lower (Québec: Secondary II or lower)  (Go to EDU_Q09)
2  Grade 9 – 10 (Québec: Secondary III or IV, Newfoundland and Labrador: 1st year of secondary)  (Go to EDU_Q09)
3  Grade 11 – 13 (Québec: Secondary V, Newfoundland and Labrador: 2nd to 4th year of secondary)
   DK, R  (Go to EDU_Q09)

**EDU_Q08**

Did ^YOU8 graduate from high school (secondary school)?

1  Yes
2  No
DK, R
EDU_Q09  ^HAVE9_C ^YOU8 received any other education that could be counted towards a degree, certificate or diploma from an educational institution?

1  Yes
2  No       (Go to EDU2_END)
    DK, R    (Go to EDU2_END)

EDU_Q10  What is the highest degree, certificate or diploma ^YOU8 ^HAVE10 obtained?

01  No post-secondary degree, certificate or diploma
02  Trade certificate or diploma from a vocational school or apprenticeship training
03  Non-university certificate or diploma from a community college, CEGEP, school of nursing, etc.
04  University certificate below bachelor’s level
05  Bachelor’s degree
06  University degree or certificate above bachelor’s degree
    DK, R
Labour force (LBS)

LABOUR FORCE (SectLabel)

LF2_BEG

LF2_C1A If (do LF2 block = 1), go to LF2_C1B. Otherwise, go to LF2_END.

LF2_C1B If (do LBF block = 1), go to LF2_END. Otherwise, go to LF2_C1C.

LF2_C1C If age < 15 or age > 75, go to LF2_END. Otherwise, go to LF2_R1.

LF2_R1 The next questions concern ^YOUR2 activities in the last 7 days. By the last 7 days, I mean beginning [date one week ago], and ending [date yesterday].

INTERVIEWER: Press <Enter> to continue.

LF2_Q1 Last week, did ^YOU2 work at a job or a business? Please include part-time jobs, seasonal work, contract work, self-employment, baby-sitting and any other paid work, regardless of the number of hours worked.

1 Yes
2 No
3 Permanently unable to work (Go to LF2_END)
    DK, R (Go to LF2_END)

LF2_E1 A response inconsistent with a response to a previous question has been entered. Please confirm.

Trigger soft edit if GEN_Q08 = 2 (did not work at any time in past 12 months) and LF2_Q1 = 1.

LF2_C2 If LF2_Q1 = 1, go to LF2_Q3. Otherwise, go to LF2_Q2.

LF2_Q2 Did ^YOU1 have more than one job or business last week?

1 Yes
2 No
    DK, R
    Go to LF2_R5

LF2_Q3 In the past 4 weeks, did ^YOU2 do anything to find work?

1 Yes
2 No
    DK, R
    Go to LF2_END
The next questions are about ^YOUR1 current job or business.

INTERVIEWER: If person currently holds more than one job, report on the job for which the number of hours worked per week is the greatest.

Press <Enter> to continue.

^ARE_C ^YOU1 an employee or self-employed?

LBS_31

1  Employee  (Go to LF2_Q33)
2  Self-employed  (Go to LF2_Q33)
3  Working in a family business without pay  (Go to LF2_Q33)

Press <Enter> to continue.

What is the name of ^YOUR1 business?

________________________

(50 spaces)

DK,R

Go to LF2_Q34

For whom ^DOVERB ^YOU1 currently work? (For example: name of business, government department or agency, or person)

________________________

(50 spaces)

DK,R

What kind of business, industry or service is this? (For example: cardboard box manufacturing, road maintenance, retail shoe store, secondary school, dairy farm, municipal government)

________________________

(50 spaces)

DK,R

What kind of work ^ARE ^YOU1 doing? (For example: babysitting in own home, factory worker, forestry technician)

________________________

(50 spaces)

DK,R

Note: Use trigram search, source file is PrepSOC.tdf

LF2_D35  SIC_CODE (4 bytes)

Note: Store SOC Code associated with LF2_Q35

LF2_C35  If LF2_D35 = 1 OR LF2_D35 = 2 (OtherSpec), go to LF2_S35. Otherwise, go to LF2_Q36.

LF2_S35  INTERVIEWER: Specify.

________________________

(50 spaces)

DK,R
What are \(^{\text{YOUR1}}\) most important activities or duties? (For example: caring for children, stamp press machine operator, forest examiner)

\[
\begin{align*}
\text{________________________} \\
\text{DK}, \text{R}
\end{align*}
\]

About how many hours a week \(^{\text{DOVERB}}\) \(^{\text{YOU1}}\) usually work at \(^{\text{YOUR1}}\) job or business? If \(^{\text{YOU2}}\) usually \([\text{work/works}]\) extra hours, paid or unpaid, please include these hours.

\[
\begin{array}{c|c}
\text{Hours} & \text{MIN: 1} \quad \text{MAX: 168; warning after 84} \\
\hline
\text{DK}, \text{R}
\end{array}
\]

Note: If LF2_Q1 = 1 or LF2_Q2 = 1 and non-proxy interview, use “work”. Otherwise, use “works”.

At \(^{\text{YOUR1}}\) place of work, what are the restrictions on smoking?

\[\text{INTerviewer: Read categories to respondent.}\]

1. Restricted completely
2. Allowed in designated areas
3. Restricted only in certain places
4. Not restricted at all

\[\text{DK}, \text{R}\]

Note: The data from this variable can be found under the Exposure to Second Hand Smoke (ETS) in the data dictionary.

If LF2_Q3 = 1, go to LF2_Q7. Otherwise, go to LF2_END.

You indicated that \(^{\text{YOU2}}\) \(^{\text{HAVE}}\) more than one job.

About how many hours a week \(^{\text{DOVERB}}\) \(^{\text{YOU1}}\) usually work at \(^{\text{YOUR1}}\) other job(s)? If \(^{\text{YOU2}}\) usually \([\text{work/works}]\) extra hours, paid or unpaid, please include these hours.

\[
\begin{array}{c|c}
\text{Hours} & \text{MIN: 1} \quad \text{MAX: } 168 - \text{LF2_Q5}; \text{warning after 30} \\
\hline
\text{DK}, \text{R}
\end{array}
\]

Note: If non-proxy interview and (LF2_Q1 = 1 or LF2_Q2 = 1), use “work”. Otherwise, use “works”.

If LF2_Q5 = 168, then maximum = 1.
If LF2_Q5 = DK or R, then maximum = 168.
Physical activities – Facilities at work (PAF)

PAF_BEG

PAF_C1A If (do PAF block = 1), go to PAF_C1B.
Otherwise, go to PAF_END.

PAF_C1B If proxy interview, go to PAF_END.
Otherwise, go to PAF_C1C.

PAF_C1C If age < 15 or age > 75 or if LF2_Q1 <> 1 or if LBF_Q1 <> 1, go to PAF_END.
Otherwise, go to PAF_Q01.

PAF_Q01 Do you usually work most of the time at home?

PAF_01

1 Yes
2 No
DK, R (Go to PAF_END)

PAF_R01 Now I would like to ask some questions about physical activity facilities at or near your place of work.
INTERVIEWER: Press <Enter> to continue.

PAF_Q02 At or near your place of work, do you have access to:

PAF_02

…a pleasant place to walk, jog, bicycle or rollerblade?

1 Yes
2 No
3 Not applicable
DK, R (Go to PAF_END)

PAF_Q03 (At or near your place of work, do you have access to:)

PAF_03

…playing fields or open spaces for ball games or other sports?

1 Yes
2 No
DK, R

PAF_Q04 (At or near your place of work, do you have access to:)

PAF_04

…a gym or physical fitness facilities?

1 Yes
2 No
DK, R

PAF_Q05 (At or near your place of work, do you have access to:)

PAF_05

…organized fitness classes?

1 Yes
2 No
DK, R

PAF_C06 If PAF_Q01 = 1, go to PAF_END.
Else go to PAF_Q06.
### PAF_Q06
(At or near your place of work, do you have access to:)

...any organized recreational sport teams?

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>

### PAF_Q07
At or near your place of work, do you have access to:

...showers and/or change rooms?

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
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</table>

### PAF_Q08
(At or near your place of work, do you have access to:)

...programs to improve health, physical fitness or nutrition?

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<td></td>
<td>DK, R</td>
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</tbody>
</table>

PAF_END
Dwelling characteristics (DWL)

DWL_BEG

DWL_C01  If (do block DWL = 1), go to DWL_R01. Otherwise, go to DWL_END.

DWL_R01  Now a few questions about your dwelling.
INTERVIEWER: Press <Enter> to continue.

DWL_C01B  If area frame, go to DWL_Q02. Otherwise, go to DWL_Q01.

DWL_Q01  What type of dwelling do you live in? Is it a:
DHHDDWE INTERVIEWER: Read categories to respondent.

<table>
<thead>
<tr>
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<th>...</th>
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<tbody>
<tr>
<td>01</td>
<td>single detached?</td>
</tr>
<tr>
<td>02</td>
<td>double?</td>
</tr>
<tr>
<td>03</td>
<td>row or terrace?</td>
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<tr>
<td>04</td>
<td>duplex?</td>
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<tr>
<td>05</td>
<td>low-rise apartment of fewer than 5 stories or a flat?</td>
</tr>
<tr>
<td>06</td>
<td>high-rise apartment of 5 stories or more?</td>
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<tr>
<td>07</td>
<td>institution?</td>
</tr>
<tr>
<td>08</td>
<td>hotel; rooming/lodging house; camp?</td>
</tr>
<tr>
<td>09</td>
<td>mobile home?</td>
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<tr>
<td>10</td>
<td>other – Specify</td>
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<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>

DWL_C01S  If DWL = 10, go to DWL_Q01S. Otherwise, go to DWL_Q02.

DWL_Q01S  INTERVIEWER: Specify.

_______________________________________________
(80 spaces)
DK, R

DWL_Q02  How many bedrooms are there in this dwelling?
DHH_BED INTERVIEWER: Enter "0" if no separate, enclosed bedroom.

_ _ _ _ Number of bedrooms
(MIN: 0) (MAX: 20)
DK, R

DWL_E02  An unusual number has been entered. Please confirm.

Trigger soft edit if (DWL_Q02 > 10).

DWL_Q03  Is this dwelling owned by a member of this household?
DHH OWN

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>

DWL_END
Home safety (HMS)

HMS_BEG

HMS_C1A If (do HMS block = 2), go to HMS_END.
Otherwise, go to HMS_C1B.

HMSFDO If proxy interview, go to HMS_END.
Otherwise, go to HMS_R1.

HMS_R1 Now, a few questions about things some people do to make their homes safe.
INTERVIEWER: Press <Enter> to continue.

HMS_Q1 Is there at least 1 working smoke detector installed in your home?
1 Yes
2 No (Go to HMS_Q5)
   DK, R (Go to HMS_END)

HMS_Q2 Are there smoke detectors installed on every level of your home, including the basement?
1 Yes
2 No
   DK, R

HMS_Q3 Are the smoke detectors tested each month?
1 Yes
2 No
   DK, R

HMS_Q4 How often are the batteries changed in your smoke detectors?
INTERVIEWER: Read categories to respondent.
1 At least every 6 months
2 At least every year
3 As needed when the low battery warning chirps
4 Never
5 Not applicable (Hard wired)
   DK, R

HMS_Q5 Is there an escape plan for getting out of your home in case of a fire?
1 Yes
2 No (Go to HMS_END)
   DK, R (Go to HMS_END)

HMS_C6 If household size > 1, go to HMS_Q6.
Otherwise, go to HMS_END.

HMS_Q6 Have the members of your household ever discussed this plan?
1 Yes
2 No
   DK, R

HMS_END
Income (INC)

INC_BEG

INC_C1 If (do INC block = 1), go to INC_R1. Otherwise, go to INC_END.

INC_R1 Although many health expenses are covered by health insurance, there is still a relationship between health and income. Please be assured that, like all other information you have provided, these answers will be kept strictly confidential.
INTERVIEWER: Press <Enter> to continue.

INC_Q1 Thinking about the total income for all household members, from which of the following sources did your household receive any income in the past 12 months?
INTERVIEWER: Read categories to respondent. Mark all that apply.

<table>
<thead>
<tr>
<th>INC_1A</th>
<th>1</th>
<th>Wages and salaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>INC_1B</td>
<td>2</td>
<td>Income from self-employment</td>
</tr>
<tr>
<td>INC_1C</td>
<td>3</td>
<td>Dividends and interest (e.g., on bonds, savings)</td>
</tr>
<tr>
<td>INC_1D</td>
<td>4</td>
<td>Employment insurance</td>
</tr>
<tr>
<td>INC_1E</td>
<td>5</td>
<td>Worker’s compensation</td>
</tr>
<tr>
<td>INC_1F</td>
<td>6</td>
<td>Benefits from Canada or Quebec Pension Plan</td>
</tr>
<tr>
<td>INC_1G</td>
<td>7</td>
<td>Retirement pensions, superannuation and annuities</td>
</tr>
<tr>
<td>INC_1H</td>
<td>8</td>
<td>Old Age Security and Guaranteed Income Supplement</td>
</tr>
<tr>
<td>INC_1I</td>
<td>9</td>
<td>Child Tax Benefit</td>
</tr>
<tr>
<td>INC_1J</td>
<td>10</td>
<td>Provincial or municipal social assistance or welfare</td>
</tr>
<tr>
<td>INC_1K</td>
<td>11</td>
<td>Child support</td>
</tr>
<tr>
<td>INC_1L</td>
<td>12</td>
<td>Alimony</td>
</tr>
<tr>
<td>INC_1M</td>
<td>13</td>
<td>Other (e.g., rental income, scholarships)</td>
</tr>
<tr>
<td>INC_1N</td>
<td>14</td>
<td>None</td>
</tr>
</tbody>
</table>

INC_E1 You cannot select “None” and another category. Please return and correct.
Trigger hard edit if INC_Q1 = 14 and any other response selected in INC_Q1.

INC_E2 Inconsistent answers have been entered. Please confirm.
Trigger soft edit if (INC_Q1 <> 1 or 2) and (LBF_Q01 = 1 or LBF_Q02 = 1 or LBF_Q21 = 1) or (LF2_Q1 = 1 or LF2_Q2 = 1).

INC_C2 If more than one source of income is indicated, go to INC_Q2. Otherwise, go to INC_Q3.

Note: In processing, if the respondent reported only one source of income in INC_Q1, the variable INC_Q2 is given its value.
**INC_Q2**

**What was the main source of income?**

1. Wages and salaries  
2. Income from self-employment  
3. Dividends and interest (e.g., on bonds, savings)  
4. Employment insurance  
5. Worker’s compensation  
6. Benefits from Canada or Quebec Pension  
7. Retirement pensions, superannuation and annuities  
8. Old Age Security and Guaranteed Income Supplement  
9. Child Tax Benefit  
10. Provincial or municipal social assistance or welfare  
11. Child support  
12. Alimony  
13. Other (e.g., rental income, scholarships)  
14. None (category created during processing)

**DK, R**

**INC_E3**

The main source of income is not selected as one of the sources of income for all household members. Please return and correct.

Trigger hard edit if the response in INC_Q2 was not selected in INC_Q1.

**INC_Q3**

**What is your best estimate of the total income, before taxes and deductions, of all household members from all sources in the past 12 months?**

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th>Income (Go to INC_C4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0 (Go to INC_END)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>DK, R (Go to INC_END)</td>
<td></td>
</tr>
</tbody>
</table>

**Note:** In processing, responses reported in INC_Q3 are also being recoded into the cascade categories of INC_Q3A to INC_Q3G.

**INC_Q3A**

Can you estimate in which of the following groups your household income falls?

Was the total household income less than $20,000 or $20,000 or more?

1. Less than $20,000  
2. $20,000 or more (Go to INC_Q3E)  
3. No income (Go to INC_END)  
4. DK, R (Go to INC_END)

**INC_Q3B**

Was the total household income from all sources less than $10,000 or $10,000 or more?

1. Less than $10,000  
2. $10,000 or more (Go to INC_Q3D)  
3. DK, R (Go to INC_C4)

**INC_Q3C**

Was the total household income from all sources less than $5,000 or $5,000 or more?

1. Less than $5,000  
2. $5,000 or more  
3. DK, R

Go to INC_C4
INC_Q3D Was the total household income from all sources less than $15,000 or $15,000 or more?
1 Less than $15,000
2 $15,000 or more
DK, R
Go to INC_C4

INC_Q3E Was the total household income from all sources less than $40,000 or $40,000 or more?
1 Less than $40,000
2 $40,000 or more (Go to INC_Q3G)
DK, R (Go to INC_C4)

INC_Q3F Was the total household income from all sources less than $30,000 or $30,000 or more?
1 Less than $30,000
2 $30,000 or more
DK, R
Go to INC_C4

INC_Q3G Was the total household income from all sources:
INTERVIEWER: Read categories to respondent.
1 ... less than $50,000?
2 ... $50,000 to less than $60,000?
3 ... $60,000 to less than $80,000?
4 ... $80,000 to less than $100,000?
5 ... $100,000 or more?
DK, R

INC_C4 If age >= 15, go to INC_Q4.
Otherwise, go to INC_END.

INC_Q4 What is your best estimate of ^YOUR2 total personal income, before taxes and other deductions, from all sources in the past 12 months?

| | | | | | Income (Go to INC_END)
(MIN: 0) (MAX: 500,000; warning after 150,000)
0 (Go to INC_END)
DK, R (Go to INC_Q4A)

Note: In processing, responses reported in INC_Q4 are also coded into the cascade categories of INC_Q4A to INC_Q4G.

INC_Q4A Can you estimate in which of the following groups ^YOUR2 personal income falls? Was ^YOUR1 total personal income less than $20,000 or $20,000 or more?
1 Less than $20,000
2 $20,000 or more (Go to INC_Q4E)
3 No income (Go to INC END)
DK, R (Go to INC END)
<table>
<thead>
<tr>
<th>INC_Q4B</th>
<th>Was ^YOUR1 total personal income less than $10,000 or $10,000 or more?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than $10,000</td>
</tr>
<tr>
<td>2</td>
<td>$10,000 or more</td>
</tr>
<tr>
<td></td>
<td>(Go to INC_Q4D)</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td></td>
<td>(Go to INC_END)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INC_Q4C</th>
<th>Was ^YOUR1 total personal income less than $5,000 or $5,000 or more?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than $5,000</td>
</tr>
<tr>
<td>2</td>
<td>$5,000 or more</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td></td>
<td>Go to INC_END</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INC_Q4D</th>
<th>Was ^YOUR1 total personal income less than $15,000 or $15,000 or more?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than $15,000</td>
</tr>
<tr>
<td>2</td>
<td>$15,000 or more</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td></td>
<td>Go to INC_END</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INC_Q4E</th>
<th>Was ^YOUR1 total personal income less than $40,000 or $40,000 or more?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than $40,000</td>
</tr>
<tr>
<td>2</td>
<td>$40,000 or more</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td></td>
<td>(Go to INC_Q4G)</td>
</tr>
<tr>
<td></td>
<td>(Go to INC_END)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INC_Q4F</th>
<th>Was ^YOUR1 total personal income less than $30,000 or $30,000 or more?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than $30,000</td>
</tr>
<tr>
<td>2</td>
<td>$30,000 or more</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
<tr>
<td></td>
<td>Go to INC_END</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INC_Q4G</th>
<th>Was ^YOUR1 total personal income:</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTERVIEWER: Read categories to respondent.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>... less than $50,000?</td>
</tr>
<tr>
<td>2</td>
<td>... $50,000 to less than $60,000?</td>
</tr>
<tr>
<td>3</td>
<td>... $60,000 to less than $80,000?</td>
</tr>
<tr>
<td>4</td>
<td>... $80,000 to less than $100,000?</td>
</tr>
<tr>
<td>5</td>
<td>... $100,000 or more?</td>
</tr>
<tr>
<td></td>
<td>DK, R</td>
</tr>
</tbody>
</table>

| INC_END | |
|---------| |
**Food security (FSC)**

**FSC_BEG**

**FSC_C01** If (do FSC block = 1), then go to FSC_D010.
**FSCFOPT** Otherwise, go to FSC_END.

**FSC_D010** If HhldSize = 1, then

- ^YouAndOthers = "you"
- ^YouAndOthers_C = "You"

Else

- ^YouAndOthers = "you and other household members"
- ^YouAndOthers_C = "You and other household members"

Endif

If (OlderKids + YoungKids = 1), then

- ^ChildFName = ChildFName
- ^ChildWas = ChildFName + "was"
- ^AnyChild = ChildFName
- ^AnyChilds = ChildFName + "'s"
- ^WasAnyChild = "was" + ChildFName

Else

- ^ChildFName = "the children"
- ^ChildWas = "The children were"
- ^AnyChild = "any of the children"
- ^AnyChilds = "any of the children's"
- ^WasAnyChild = "were any of the children"

End if

If (Adults + YoungAdults) = 1, then

- ^YouOtherAdults = "you"
- ^YouOtherAdults_C = "You"

Else

- ^YouOtherAdults = "you or other adults in your household"
- ^YouOtherAdults_C = "You or other adults in your household"

Endif

**FSC_R010**

The following questions are about the food situation for your household in the past 12 months.

**INTERVIEWER**: Press <Enter> to continue.

**FSC_Q010** Which of the following statements best describes the food eaten in your household in the past 12 months, that is, since [current month] of last year?

**INTERVIEWER**: Read categories to respondent.

1. ^YouAndOthers_C always had enough of the kinds of food you wanted to eat.
2. ^YouAndOthers_C had enough to eat, but not always the kinds of food you wanted.
3. Sometimes ^YouAndOthers did not have enough to eat.
4. Often ^YouAndOthers didn't have enough to eat.

**D K , R** (Go to FSC_END)

**FSC_R020** Now I'm going to read you several statements that may be used to describe the food situation for a household. Please tell me if the statement was often true, sometimes true, or never true for ^YouAndOthers in the past 12 months.

**INTERVIEWER**: Press <Enter> to continue.
FSC_Q020 The first statement is: ...^YouAndOthers_C worried that food would run out before you got money to buy more. Was that often true, sometimes true, or never true in the past 12 months?

1 Often true
2 Sometimes true
3 Never true
DK, R

FSC_Q030 The food that ^YouAndOthers bought just didn't last, and there wasn't any money to get more. Was that often true, sometimes true, or never true in the past 12 months?

1 Often true
2 Sometimes true
3 Never true
DK, R

FSC_Q040 ^YouAndOthers_C couldn't afford to eat balanced meals. In the past 12 months was that often true, sometimes true, or never true?

1 Often true
2 Sometimes true
3 Never true
DK, R

FSC_C050 If (OlderKids + YoungKids > 0), go to FSC_R050. Otherwise, go to FSC_C070.

FSC_R050 Now I'm going to read a few statements that may describe the food situation for households with children.

INTERVIEWER: Press <Enter> to continue.

FSC_Q050 ^YouOtherAdults_C relied on only a few kinds of low-cost food to feed ^ChildFName because you were running out of money to buy food. Was that often true, sometimes true, or never true in the past 12 months?

1 Often true
2 Sometimes true
3 Never true
DK, R

FSC_Q060 ^YouOtherAdults_C couldn't feed ^ChildFName a balanced meal, because you couldn't afford it. Was that often true, sometimes true, or never true in the past 12 months?

1 Often true
2 Sometimes true
3 Never true
DK, R

FSC_C070 If (((FSC_Q020 or FSC_Q030 or FSC_Q040 or FSC_Q050 or FSC_Q060 <= 2) or (FSC_Q010 = 3 or 4)) and (OlderKids + YoungKids > 0)), go to FSC_Q070. Else if (((FSC_Q020 or FSC_Q030 or FSC_Q040 or FSC_Q050 or FSC_Q060 <= 2) or (FSC_Q010 = 3 or 4))), go to FSC_R080. Otherwise, go to FSC_END.
^ChildWas not eating enough because ^YouOtherAdults just couldn't afford enough food. Was that often, sometimes, or never true in the past 12 months?

1  Often true  
2  Sometimes true  
3  Never true  

DK, R

The following few questions are about the food situation in the past 12 months for you or any other adults in your household.

INTERVIEWER: Press <Enter> to continue.

In the past 12 months, since last [current month] did ^YouOtherAdults ever cut the size of your meals or skip meals because there wasn't enough money for food?

1  Yes  
2  No  
(DK, R) (Go to FSC_Q090)

DK, R  

How often did this happen---almost every month, some months but not every month, or in only 1 or 2 months?

1  Almost every month  
2  Some months but not every month  
3  Only 1 or 2 months  

DK, R

In the past 12 months, did you (personally) ever eat less than you felt you should because there wasn't enough money to buy food?

1  Yes  
2  No  

DK, R

In the past 12 months, were you (personally) ever hungry but didn't eat because you couldn't afford enough food?

1  Yes  
2  No  

DK, R

In the past 12 months, did you (personally) lose weight because you didn't have enough money for food?

1  Yes  
2  No  

DK, R

If (FSC_Q070 = 1 or 2) or (FSC_Q080 or FSC_Q090 or FSC_Q100 or FSC_Q110 = 1), go to FSC_Q120.
Otherwise, go to FSC_END.
FSC_Q120  In the past 12 months, did ^YouOtherAdults ever not eat for a whole day because there wasn't enough money for food?

1  Yes
2  No    (Go to FSC_C130)
       DK, R    (Go to FSC_C130)

FSC_Q121  How often did this happen---almost every month, some months but not every month, or in only 1 or 2 months?

1  Almost every month
2  Some months but not every month
3  Only 1 or 2 months
       DK, R

FSC_C130  If (OlderKids + YoungKids <> 0) go to FSC_R130. Otherwise, go to FSC_END.

FSC_R130  Now, a few questions on the food experiences for children in your household.
INTERVIEWER: Press <Enter> to continue.

FSC_Q130  In the past 12 months, did ^YouOtherAdults ever cut the size of ^AnyChilds meals because there wasn't enough money for food?

1  Yes
2  No
       DK, R

FSC_Q140  In the past 12 months, did ^AnyChild ever skip meals because there wasn't enough money for food?

1  Yes
2  No    (Go to FSC_Q150)
       DK, R    (Go to FSC_Q150)

FSC_Q141  How often did this happen---almost every month, some months but not every month, or in only 1 or 2 months?

1  Almost every month
2  Some months but not every month
3  Only 1 or 2 months
       DK, R

FSC_Q150  In the past 12 months, ^WasAnyChild ever hungry but you just couldn't afford more food?

1  Yes
2  No
       DK, R

FSC_Q160  In the past 12 months, did ^AnyChild ever not eat for a whole day because there wasn't enough money for food?

1  Yes
2  No
       DK, R

FSC_END
Administration information (ADM)

ADM_BEG

ADM_C01 If (do ADM block = 1), go to ADM_R01. Otherwise, go to ADM_END.

Health Number

ADM_R01 [Statistics Canada, your [provincial/territorial] ministry of health and the « Institut de la Statistique du Québec »/Statistics Canada and your [provincial/territorial] ministry of health] would like your permission to link information collected during this interview. This includes linking your survey information to ^YOUR2 past and continuing use of health services such as visits to hospitals, clinics and doctor’s offices.

INTERVIEWER: Press <Enter> to continue.

Note: If province = 24, use “Statistics Canada, your [provincial/territorial] ministry of health and « Institut de la Statistique du Québec »”. Otherwise, use “Statistics Canada and your [provincial/territorial] ministry of health”.

Note: If province = 60, 61 or 62, use “territorial”. Otherwise, use “provincial”.

ADM_Q01B This linked information will be kept confidential and used only for statistical purposes. Do we have your permission?

1  Yes
2  No (Go to ADM_C04A)
   DK, R (Go to ADM_C04A)

ADM_C3A If province = 10, [province] = [Newfoundland and Labrador]
If province = 11, [province] = [Prince Edward Island]
If province = 12, [province] = [Nova Scotia]
If province = 13, [province] = [New Brunswick]
If province = 24, [province] = [Quebec]
If province = 35, [province] = [Ontario]
If province = 46, [province] = [Manitoba]
If province = 47, [province] = [Saskatchewan]
If province = 48, [province] = [Alberta]
If province = 59, [province] = [British Columbia]
If province = 60, [province] = [Yukon]
If province = 61, [province] = [Northwest Territories]
If province = 62, [province] = [Nunavut]

ADM_Q03A Having a provincial or territorial health number will assist us in linking to this other information.

   ^DOVERB_C ^YOU2 have a(n) [province] health number?

1  Yes (Go to HN)
2  No
   DK, R (Go to ADM_C04A)
ADM_Q03B For which province or territory is ^YOUR1 health number?

10 Newfoundland and Labrador
11 Prince Edward Island
12 Nova Scotia
13 New Brunswick
24 Quebec
35 Ontario
46 Manitoba
47 Saskatchewan
48 Alberta
59 British Columbia
60 Yukon
61 Northwest Territories
62 Nunavut
88 Does not have a Canadian health number (Go to ADM_C04A)
DK, R (Go to ADM_C04A)

HN What is ^YOUR1 health number?
INTERVIEWER: Enter a health number for [province]. Do not insert blanks, hyphens or commas between the numbers.

________________________
(8 - 12 spaces)
DK, R

ADM_C04A If province = 24 (Quebec), go to ADM_R04AC.

ADM_C04B If province = 60, 61 or 62 (Yukon, NWT or Nunavut), go to ADM_R04AB.
Otherwise, go to ADM_R04AA.

Data Sharing – All Provinces (excluding Quebec and the territories)

ADM_R04AA Statistics Canada would like your permission to share the information collected in this survey with provincial and territorial ministries of health, Health Canada and the Public Health Agency of Canada.

Provincial ministries of health may make this information available to local health authorities, but names, addresses, telephone numbers and health numbers will not be provided.
INTERVIEWER: The personal identifiers (names, addresses, telephone numbers and health numbers) will not be provided to Health Canada or the Public Health Agency of Canada.
“Provincial ministries of health” includes the territorial ministries of health.
Press <Enter> to continue.
Go to ADM_Q04B
Data Sharing – NWT, Yukon, Nunavut

ADM_R04AB  Statistics Canada would like your permission to share the information collected in this survey with Health Canada, the Public Health Agency of Canada and provincial and territorial ministries of health.

Provincial ministries of health may make this information available to local health authorities, but names, addresses, telephone numbers and health numbers will not be provided.

INTERVIEWER: The personal identifiers (names, addresses, telephone numbers and health numbers) will not be provided to Health Canada or the Public Health Agency of Canada.

“Provincial ministries of health” includes the territorial ministries of health.

Press <Enter> to continue.

Go to ADM_Q04B

Data Sharing – Quebec

ADM_R04AC  Statistics Canada would like your permission to share the information collected in this survey with provincial and territorial ministries of health, the « Institut de la Statistique du Québec », Health Canada and the Public Health Agency of Canada.

The « Institut de la Statistique du Québec » and provincial ministries of health may make this information available to local health authorities, but names, addresses, telephone numbers and health numbers will not be provided.

INTERVIEWER: The personal identifiers (names, addresses, telephone numbers and health numbers) will not be provided to Health Canada or the Public Health Agency of Canada.

“Provincial ministries of health” includes the territorial ministries of health.

Press <Enter> to continue.

ADM_Q04B  All information will be kept confidential and used only for statistical purposes.

Do you agree to share the information provided?

1  Yes
2  No
DK, R

Frame Evaluation

FRE_C1  If RDD or FREFLAG = 1 (i.e. the frame evaluation questions have been done for the household), go to ADM_C09.

FRE_R1  And finally, a few questions to evaluate the way households were selected for this survey.

INTERVIEWER: Press <Enter> to continue.

FRE_Q1  How many different telephone numbers are there for your household, not counting cellular phone numbers and phone numbers used strictly for business purposes?

1  1
2  2
3  3 or more
4  None (Go to FRE_Q4)
DK, R (Go to ADM_C09)
FRE_Q2  What is [your/your main] phone number, including the area code?
INTERVIEWER: Do not include cellular or business phone numbers.
Telephone number: [telnum].

Note:  If FRE_Q1 = 1, use "your".
Otherwise, use "your main".

Code  INTERVIEWER: Enter the area code.
Tel   INTERVIEWER: Enter the telephone number.

DK   (Go to ADM_C09)
R    (Go to FRE_Q2A)

Go to FRE_C3

FRE_Q2A Could you tell me the area code and the first 5 digits of your phone number? Even that will help evaluate the way households were selected.

1_1_1_1_1_1_1
DK, R  (Go to ADM_C09)

FRE_C3 If FRE_Q1 = 1 (1 phone), go to ADM_C09.

FRE_Q3 What is [your other phone number/another of your phone numbers], including the area code?
INTERVIEWER: Do not include cellular or business phone numbers.

Note:  If FRE_Q1 = 2, use "your other phone number".
Otherwise, use "another of your phone numbers".

CODE2  INTERVIEWER: Enter the area code.
TEL2   INTERVIEWER: Enter the telephone number.

DK   (Go to ADM_C09)
R    (Go to FRE_Q3A)

Go to ADM_C09

FRE_Q3A Could you tell me the area code and the first 5 digits of [your other phone number/another of your phone numbers]? (Even that will help evaluate the way households were selected.)

1_1_1_1_1_1_1
DK, R  (Go to ADM_C09)

Note:  If FRE_Q1 = 2, use "your other phone number" in FRE_Q3.
Otherwise, use "another of your phone numbers" in FRE_Q3.

FRE_Q4 ^DOVERB_C ^YOU2 have a working cellular phone that can place and receive calls?

1  Yes
2  No
DK, R
Administration (Part 1)

ADM_C09  If RDD, go to ADM_N10.

ADM_N09  INTERVIEWER: Was this interview conducted on the telephone or in person?

ADM_N09

1  On telephone
2  In person
3  Both
   DK, R

ADM_N10  INTERVIEWER: Was the respondent alone when you asked this health questionnaire?

ADM_N10

1  Yes (Go to ADM_N12)
2  No
   DK, R (Go to ADM_N12)

ADM_N11  INTERVIEWER: Do you think that the answers of the respondent were affected by someone else being there?

ADM_N11

1  Yes
2  No
   DK, R

ADM_N12  INTERVIEWER: Record language of interview

ADM_N12

1  English
2  French
3  Chinese
4  Italian
5  Punjabi
6  Spanish
7  Portuguese
8  Polish
9  German
10  Vietnamese
11  Arabic
12  Tagalog (Filipino)
13  Greek
14  Tamil
15  Cree
16  Afghan
17  Cantonese
18  Hindi
19  Mandarin
20  Persian
21  Russian
22  Ukrainian
23  Urdu
24  Inuktitut
25  Other – Specify
   DK, R

ADM_C12S  If ADM_N12 = 90, go to ADM_N12S. Otherwise, go to ADM_END.

ADM_N12S  INTERVIEWER: Specify

________________________
   (80 spaces)
   DK, R

ADM_END
Exit

The following module only includes part of the questions asked during the CCHS interview. It includes what we believe may be of interest for data users.

Possible future contact

PFC_R01  As part of this study, we may need to get in touch in the future.

INTERVIEWER: Press <Enter> to continue.

(DK, R are not allowed)

PFC_END

Administration – Fictitious Name (ADF)

ADF_N05  INTERVIEWER: Is this a fictitious name for the respondent?

1  Yes
2  No  (go to CON1_RINT)
DK, R  (go to CON1_RINT)

ADF_N06  INTERVIEWER: Remind respondent about the importance of getting correct names. Do you want to make corrections to:

1  … first name only?
2  … last name only?  (go to ADF_N08)
3  … both names?
4  … no corrections?  (go to CON1_RINT)
DK, R  (go to CON1_RINT)

ADF_N07  INTERVIEWER: Enter the first name only.

________________________
(25 spaces)
DK, R

ADF_C08  If ADF_N05 = 3, go to ADF_N08. Otherwise, go to CON1_RINT.

ADF_N08  INTERVIEWER: Enter the last name only.

________________________
(25 spaces)
DK, R

ADF_END
Exit Introduction

EI_R01 Before we finish, I would like to ask you a few other questions.

INTERVIEWER: Press <Enter> to continue.

(DK, R are not allowed)

EI_END

Permission to Share (if partial interview)

Data Sharing – All Provinces (excluding Quebec and the territories)

PS_R01 Statistics Canada would like your permission to share the information collected in this survey with provincial and territorial ministries of health, Health Canada and the Public Health Agency of Canada.

Your provincial ministry of health may make some of this information available to your local health region, but names, addresses, telephone numbers and health numbers will not be provided.

INTERVIEWER: Press <Enter> to continue.

Go to PS_Q01

Data Sharing – NWT, Yukon, Nunavut

PS_R01 Statistics Canada would like your permission to share the information collected in this survey with Health Canada, the Public Health Agency of Canada and provincial and territorial ministries of health.

INTERVIEWER: Press <Enter> to continue.

Go to PS_Q01

Data Sharing – Quebec

PS_R01 Statistics Canada would like your permission to share the information collected in this survey with provincial and territorial ministries of health, the « Institut de la Statistique du Québec », Health Canada and the Public Health Agency of Canada.

The « Institut de la Statistique du Québec » may make some of this information available to your local health region, but names, addresses, telephone numbers and health numbers will not be provided.

INTERVIEWER: Press <Enter> to continue.

PS_Q01 All information will be kept confidential and used only for statistical purposes.

Do you agree to share the information provided?

1 Yes
2 No
DK, R

PS_END
Thank you 1

TY1_Q01 Thank you for your time.

INTERVIEWER: Press <Enter> to continue.

(DK, R are not allowed)

TY1_END
Appendix 1 – Canadian community health survey content (2008)
### Appendix 1 – Canadian community health survey content (2008)

#### Core Modules (all health regions)
- Age of respondent
- Alcohol use
- Chronic conditions
- Exposure to second-hand smoke
- Fruit and vegetable consumption
- Flu shots
- General health
- Health care utilization
- Pain and discomfort
- Height and weight – Self-reported
- Maternal experiences - Breastfeeding
- Physical activities
- Restriction of activities
- Smoking

#### Administration and Socio-demographics
- Administration information
- Dwelling characteristics
- Education
- Income
- Labour force
- Socio-demographic characteristics

#### Theme Modules (all health regions)

##### 2007-2008 Theme: Healthy Living
- Changes made to improve health
- Physical activities – Facilities at work
- Food security
- Sedentary activities
- Oral health 1

##### 2007 Theme: Health Services Access
- Access to health care services
- Patient satisfaction – Health care services
- Wait times

##### 2008 Themes
1) Height and weight - Measured
2) Chronic conditions screening
   - Blood test
   - Colorectal cancer screening
   - Mammography
   - Pap smear test
   - Physical check-up
   - Spirometry
### Optional Modules (selected health regions)

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Alcohol use - Dependence  
Alcohol use – Former drinkers  
Alcohol use during the past week  
Blood pressure check  
Breast examinations  
Breast self examinations  
Stress - Childhood and adult stressors  
Consultations about mental health  
Dental visits  
Depression  
Diabetes care  
Dietary supplement use – Vitamins and minerals  
Distress  
Driving and safety  
Eye examinations  
Food choices  
Health care system satisfaction  
Health status (SF-36)  
Health utility index  
Home care services  
Home safety  
Illicit drugs use  
Injuries  
Insurance coverage  
Mastery  
Maternal experiences – Alcohol use during pregnancy  
Maternal experiences – Smoking during pregnancy  
Smoking - Nicotine dependence  
Oral health 2  
Patient satisfaction – Health care services  
Patient satisfaction – Community-based care  
Problem gambling  
Prostate cancer screening  
Psychological well-being  
Stress - Recent life events  
Satisfaction with life  
Self-esteem  
Sexual behaviours  
Sleep  
Smoking cessation methods  
Smoking - Physician counselling  
Smoking - Stages of change  
Social support - Availability  
Social support – Utilization  
Spiritual values  
Stress – Coping with stress  
Stress – Sources  
Suicidal thoughts and attempts  
Sun safety behaviours  
Smoking - Other tobacco products  
Use of protective equipment  
Voluntary organizations - Participation  
Stress - Work stress  
Smoking - Youth smoking |

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i  Asked of a sub-sample of respondents. These theme modules were not asked of respondents in the territories.

ii  These 2007 theme modules were also selected by some regions as optional content.
Appendix 2 – Optional content selection by health regions (grouped by province) (2008)
## Appendix 2 – Optional content selection by health regions (grouped by province) (2008)

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Appendix 3 – Changes to module names between cycle 3.1 and cycle 4.1
### Appendix 3 – Changes to module names between cycle 3.1 and cycle 4.1

As of Cycle 4.1, important changes were made to the CCHS design specifically related to questionnaire content, collection and dissemination activities. In this context, some CCHS module names have been revised. The following table provides a list of modifications that were made to module names. The acronyms for all of these modules remain unchanged.

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<td>Alcohol use (ALC)</td>
<td>Alcohol use – Former drinkers (ALN)</td>
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<td>Alcohol use during the past week (ALW)</td>
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<td>Childhood and adult stressors (CST)</td>
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<td>Contacts with mental health professionals (CMH)</td>
<td>Consultations about mental health (CMH)</td>
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<td>Dietary supplement use (DSU)</td>
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<td>Health utility index (HUI)</td>
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<td>Height and weight (HWT)</td>
<td>Height and weight – Self-reported (HWT)</td>
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<td>Illicit drugs (DRG)</td>
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<td>Maternal experiences – Breastfeeding (MEX)</td>
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<td>Nicotine dependence (NDE)</td>
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<td>Patient satisfaction (PAS)</td>
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<td>Patient satisfaction - Community-based care (PSC)</td>
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<td>Problem gambling index (CPG)</td>
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<td>Stress – coping (STC)</td>
<td>Stress - Coping with stress (STC)</td>
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<td>Tobacco alternatives (TAL)</td>
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<td>Voluntary organizations (ORG)</td>
<td>Voluntary organizations - Participation (ORG)</td>
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<td>Work stress (WST)</td>
<td>Stress - Work stress (WST)</td>
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<td>Youth smoking (YSM)</td>
<td>Smoking - Youth smoking (YSM)</td>
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