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Introduction

1. CCHS content is comprised of three components:
   a. Core content is asked of all respondents, annual core content remains relatively stable over time while other common modules are asked for one or two years and alternate from year to year;
   b. Optional content is chosen by health regions and is usually coordinated at the provincial level.
   c. Rapid Response modules are cost-recovery projects asked of all respondents living in the ten provinces usually for one collection period (2 months).

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.
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)**

CN_BEG

CN_N01  INTERVIEWER: Record method of interview.

1  Telephone
2  Personal

(DK, RF are not allowed)

CN_N02  INTERVIEWER: Have you made contact?

1  Yes
2  No  (Go to CN_END)

(DK, RF are not allowed)

CN_END

**Interviewer introduction (II)**

II_BEG

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.

II_END

**Language of Preference (LP)**

LP_BEG

LP_Q01  Would you prefer that I speak in English or in French?

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<td>1</td>
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<td>2</td>
<td>French</td>
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<tr>
<td>3</td>
<td>Other</td>
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(DK, RF are not allowed)
Select respondent’s preferred non-official language.
If necessary, ask: (What language would you prefer?)

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

(DK, RF 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)**

RS_BEG

RS_R01 The next few questions will provide important basic information on the people in your household.

INTERVIEWER: Press <Enter> to continue.

RS_END

**Usual Roster (USU)**

USU_BEG

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

(DK, RF and null are not allowed)

USU_END

**Other Roster 1 (OTH1)**

OTH1_BEG

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 ANDB_Q01)

(DK, RF and null are not allowed)

RS_E1 INTERVIEWER: Press <Enter> to return to roster and enter at least one name.

Note: Trigger hard edit if RS_Q04 = 1.

OTH1_END
**Age Without Date of Birth (ANDB)**

`ANDB_Q01` What is [respondent name]’s age?

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<td>(MIN: 0) (MAX: 130)</td>
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<td></td>
<td>(DK, RF are not allowed)</td>
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**Sex (SEX)**

`SEX_Q01` INTERVIEWER: Enter [respondent name]’s sex.

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<tr>
<td>1</td>
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<tr>
<td>2</td>
<td>Female</td>
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(DK, RF are not allowed)

**Marital Status (MSNC)**

`MSNC_Q01` INTERVIEWER: Read categories to respondent.

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<tr>
<td>1</td>
<td>... married?</td>
</tr>
<tr>
<td>2</td>
<td>... living common-law?</td>
</tr>
<tr>
<td>3</td>
<td>... widowed?</td>
</tr>
<tr>
<td>4</td>
<td>... separated?</td>
</tr>
<tr>
<td>5</td>
<td>... divorced?</td>
</tr>
<tr>
<td>6</td>
<td>... single, never married?</td>
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Canadian forces (CAF)
CAF_BEG
CAF_Q01 Is [respondent name] a full time member of the regular Canadian Armed Forces?
1 Yes
2 No
(DK, RF are not allowed)

CAF_END

Relationship Without Confirmation (RNC)
RNC_BEG
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
Proxy interview (GR)

GR_BEG  Content block

External variables required:

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DOGR: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space

GR_N01  INTERVIEWER: Who is providing the information for this person’s component?

01 MEMBER1
02 MEMBER2
03 MEMBER3
04 MEMBER4
05 MEMBER5
06 MEMBER6
07 MEMBER7
08 MEMBER8
09 MEMBER9
10 MEMBER10
11 MEMBER11
12 MEMBER12
13 MEMBER13
14 MEMBER14
15 MEMBER15
16 MEMBER16
17 MEMBER17
18 MEMBER18
19 MEMBER19
20 MEMBER20

GR_C01  If selected respondent, go to GR_END.
Otherwise, go to GR_N01A.

GR_N01A  INTERVIEWER: Do you want to complete this component by proxy?

1  Yes  (Go to GR_N02)
2  No

(DK, RF are not allowed)
Go to GR_E01A
You may not proceed with the rest of this questionnaire. Please press <F10> to exit, or return and update GR_N01 or GR_N01A.

Note: Trigger hard edit if GR_N01A = 2 and not Selected Respondent.

Record the reason why this component is being completed by proxy. Proxy interviews are to occur only if the mental or physical health of the selected member makes it impossible to complete the interview during the collection period. If the reason for the proxy interview is neither of these choices, please press <F10> to exit the application and assign an appropriate outcome code.

1 Physical health condition
2 Mental health condition

(DK, RF are not allowed)

Enter the condition.

(DK, RF are not allowed)
Age of respondent (ANC)

ANC_BEG Core content

ANC_C01A If (do ANC block = 1), go to ANC_D01. Otherwise, go to ANC_END.

ANC_D01 (not applicable)

ANC_R01 For some of the questions I’ll be asking, I need to know your exact date of birth.

INTERVIEWER: Press <Enter> to continue.

Note: Date Block

ANC_N01A INTERVIEWER: Enter the day. If necessary, ask (What is the day?)

   (MIN: 1) (MAX: 31)
   DK, RF

ANC_N01B INTERVIEWER: Enter the month. If necessary, ask (What is the month?)

   01 January
   02 February
   03 March
   04 April
   05 May
   06 June
   07 July
   08 August
   09 September
   10 October
   11 November
   12 December
   DK, RF

ANC_E1 An impossible day/month combination has been entered. Please return and correct.

Note: Trigger hard edit if a month is selected that is invalid in combination with the previously entered numeric day.
ANC_N01C  INTERVIEWER: Enter a four-digit year.
If necessary, ask (What is the year?)

│││││
DK, RF

ANC_C02  If ANC_N01C (Year) = DK, RF, go to ANC_Q03.
Otherwise, go to ANC_D02.

ANC_E2  An impossible day/month/year combination has been entered. Please return and correct.

Note:  Trigger hard edit if a year is entered that is invalid in combination with the previously entered month and day.

ANC_D02  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
3  No, collect age  (Go to ANC_Q03)

(DK, RF are not allowed)

ANC_E02  Return to ANC_N01A and correct the date of birth.

Note:  Trigger hard edit if ANC_Q02 = 2.

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, RF are not allowed)

ANC_C04  If age < 12 years, go to ANC_R04.
Otherwise, go to ANC_END.
ANC_R04  

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.

ANC_END
General health (GEN)

GEN_BEG Core content

GEN_C01 If (do GEN block = 1), go to GEN_R01. Otherwise, go to GEN_END.

GEN_D01 (not applicable)

GEN_R01 This survey deals with various aspects of ^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 ^YOUR1 health is:

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

GEN_Q02 Compared to one year ago, how would you say ^YOUR1 health is now? Is it:

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, RF

GEN_C02A If proxy interview, go to GEN_Q07. Otherwise, go to GEN_Q02A.
Using a scale of 0 to 10, where 0 means "Very dissatisfied" and 10 means "Very satisfied", how do you feel about your life as a whole right now?

01 Very dissatisfied
02
03
04
05
06
07
08
09 V
10 Very satisfied
DK, RF

In general, would you say your mental health is:

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

Thinking about the amount of stress in your life, would you say that most days are:

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

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.
**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, RF  (Go to GEN_Q10)

**GEN_Q09**

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, RF

**GEN_Q10**

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, RF

**GEN_END**
Voluntary organizations - Participation (ORG)

ORG_BEG    Optional Content (See Appendix 2)

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, RF    (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, RF

ORG_END
Changes made to improve health (CIH)

CIH_BEG  Optional Content (See Appendix 2)

CIH_C1A  If (do CIH block = 1), go to CIH_C1B. 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, RF  (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, RF

CIH_D3  If CIH_Q1 = 1, ^DT_ANYTHING = "anything else". Otherwise, ^DT_ANYTHING = "anything".

CIH_Q3  Do you think there is ^DT_ANYTHING you should do to improve your physical health?

CIH_3  

   1  Yes
   2  No  (Go to CIH_END)

   DK, RF  (Go to CIH_END)
CIH_Q4 What is the most important thing?

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, RF

CIH_Q5 Is there anything stopping you from making this improvement?

1  Yes
2  No   (Go to CIH_Q7)
   DK, RF   (Go to CIH_Q7)

CIH_Q6 What is that?

INTERVIEWER: Mark all that apply.

<table>
<thead>
<tr>
<th></th>
<th>01</th>
<th>Lack of will power / self-discipline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>02</td>
<td>Family responsibilities</td>
</tr>
<tr>
<td></td>
<td>03</td>
<td>Work schedule</td>
</tr>
<tr>
<td></td>
<td>04</td>
<td>Addiction to drugs / alcohol</td>
</tr>
<tr>
<td></td>
<td>05</td>
<td>Physical condition</td>
</tr>
<tr>
<td></td>
<td>06</td>
<td>Disability / health problem</td>
</tr>
<tr>
<td></td>
<td>07</td>
<td>Too stressed</td>
</tr>
<tr>
<td></td>
<td>08</td>
<td>Too costly / financial constraints</td>
</tr>
<tr>
<td></td>
<td>09</td>
<td>Not available - in area</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Transportation problems</td>
</tr>
<tr>
<td></td>
<td>11</td>
<td>Weather problems</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

CIH_Q7 Is there anything you intend to do to improve your physical health in the next year?

1  Yes
2  No   (Go to CIH_END)
   DK, RF   (Go to CIH_END)
**CIH_Q8**  
*What is that?*

**INTERVIEWER:** Mark all that apply.

<table>
<thead>
<tr>
<th><strong>CIH_8A</strong></th>
<th>1</th>
<th>Start / Increase exercise, sports / physical activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CIH_8B</strong></td>
<td>2</td>
<td>Lose weight</td>
</tr>
<tr>
<td><strong>CIH_8C</strong></td>
<td>3</td>
<td>Change diet / improve eating habits</td>
</tr>
<tr>
<td><strong>CIH_8J</strong></td>
<td>4</td>
<td>Quit smoking / reduce amount smoked</td>
</tr>
<tr>
<td><strong>CIH_8K</strong></td>
<td>5</td>
<td>Drink less alcohol</td>
</tr>
<tr>
<td><strong>CIH_8G</strong></td>
<td>6</td>
<td>Reduce stress level</td>
</tr>
<tr>
<td><strong>CIH_8L</strong></td>
<td>7</td>
<td>Receive medical treatment</td>
</tr>
<tr>
<td><strong>CIH_8H</strong></td>
<td>8</td>
<td>Take vitamins</td>
</tr>
<tr>
<td><strong>CIH_8I</strong></td>
<td>9</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**CIH_END**
Health care system satisfaction (HCS)

HCS_BEG Optional Content (See Appendix 2)

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

HCS_C1B If proxy interview or if age < 15, go to HCS_END. Otherwise, go to HCS_D1.

HCS_D1 If province = 10, ^DT_ProvinceE = "Newfoundland and Labrador".
If province = 11, ^DT_ProvinceE = "Prince Edward Island".
If province = 12, ^DT_ProvinceE = "Nova Scotia".
If province = 13, ^DT_ProvinceE = "New Brunswick".
If province = 24, ^DT_ProvinceE = "Quebec".
If province = 35, ^DT_ProvinceE = "Ontario".
If province = 46, ^DT_ProvinceE = "Manitoba".
If province = 47, ^DT_ProvinceE = "Saskatchewan".
If province = 48, ^DT_ProvinceE = "Alberta".
If province = 59, ^DT_ProvinceE = "British Columbia".
If province = 60, ^DT_ProvinceE = "Yukon".
If province = 61, ^DT_ProvinceE = "the Northwest Territories".
If province = 62, ^DT_ProvinceE = "Nunavut".

HCS_Q1 Now, a few questions about health care services in ^DT_ProvinceE. Overall, how would you rate the availability of health care services in ^DT_ProvinceE? Would you say it is:

INTERVIEWER: Read categories to respondent.

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

HCS_D2 (not applicable)
HCS_Q2
HCS_2

Overall, how would you rate the quality of the health care services that are available in DT_ProvinceE?

INTERVIEWER: Read categories to respondent.

1  Excellent
2  Good
3  Fair
4  Poor
   DK, RF

HCS_Q3
HCS_3

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

1  Excellent
2  Good
3  Fair
4  Poor
   DK, RF

HCS_Q4
HCS_4

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, RF

HCS_END
Height and weight - Self-reported (HWT)

HWT_BEG  Core content

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?

MAM_037  

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

HWT_Q2  The next questions are about height and weight. How tall are you without shoes on?

HWT_2  

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.)  (Go to HWT_N2C)
4  4’0” to 4’11” / 48” to 59” (120.7 to 151.0 cm.)  (Go to HWT_N2D)
5  5’0” to 5’11” (151.1 to 181.5 cm.)  (Go to HWT_N2E)
6  6’0” to 6’11” (181.6 to 212.0 cm.)  (Go to HWT_N2F)
7  7’0” and over (212.1 cm. and over)  (Go to HWT_Q3)
   DK, RF  (Go to HWT_Q3)

HWT_E2  The selected height is too short for a CURRAGE year old respondent. Please return and correct.

Note:  Trigger hard edit if (HWT_Q2 < 3).
<table>
<thead>
<tr>
<th>Code</th>
<th>Height</th>
<th>Range (cm.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>1'0&quot; / 12&quot;</td>
<td>29.2 to 31.7</td>
</tr>
<tr>
<td>01</td>
<td>1'1&quot; / 13&quot;</td>
<td>31.8 to 34.2</td>
</tr>
<tr>
<td>02</td>
<td>1'2&quot; / 14&quot;</td>
<td>34.3 to 36.7</td>
</tr>
<tr>
<td>03</td>
<td>1'3&quot; / 15&quot;</td>
<td>36.8 to 39.3</td>
</tr>
<tr>
<td>04</td>
<td>1'4&quot; / 16&quot;</td>
<td>39.4 to 41.8</td>
</tr>
<tr>
<td>05</td>
<td>1'5&quot; / 17&quot;</td>
<td>41.9 to 44.4</td>
</tr>
<tr>
<td>06</td>
<td>1'6&quot; / 18&quot;</td>
<td>44.5 to 46.9</td>
</tr>
<tr>
<td>07</td>
<td>1'7&quot; / 19&quot;</td>
<td>47.0 to 49.4</td>
</tr>
<tr>
<td>08</td>
<td>1'8&quot; / 20&quot;</td>
<td>49.5 to 52.0</td>
</tr>
<tr>
<td>09</td>
<td>1'9&quot; / 21&quot;</td>
<td>52.1 to 54.5</td>
</tr>
<tr>
<td>10</td>
<td>1'10&quot; / 22&quot;</td>
<td>54.6 to 57.1</td>
</tr>
<tr>
<td>11</td>
<td>1'11&quot; / 23&quot;</td>
<td>57.2 to 59.6</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
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</tbody>
</table>

<table>
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<th>Code</th>
<th>Height</th>
<th>Range (cm.)</th>
</tr>
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<tbody>
<tr>
<td>00</td>
<td>2'0&quot; / 24&quot;</td>
<td>59.7 to 62.1</td>
</tr>
<tr>
<td>01</td>
<td>2'1&quot; / 25&quot;</td>
<td>62.2 to 64.7</td>
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<tr>
<td>02</td>
<td>2'2&quot; / 26&quot;</td>
<td>64.8 to 67.2</td>
</tr>
<tr>
<td>03</td>
<td>2'3&quot; / 27&quot;</td>
<td>67.3 to 69.8</td>
</tr>
<tr>
<td>04</td>
<td>2'4&quot; / 28&quot;</td>
<td>69.9 to 72.3</td>
</tr>
<tr>
<td>05</td>
<td>2'5&quot; / 29&quot;</td>
<td>72.4 to 74.8</td>
</tr>
<tr>
<td>06</td>
<td>2'6&quot; / 30&quot;</td>
<td>74.9 to 77.4</td>
</tr>
<tr>
<td>07</td>
<td>2'7&quot; / 31&quot;</td>
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<td>08</td>
<td>2'8&quot; / 32&quot;</td>
<td>80.0 to 82.5</td>
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<td>09</td>
<td>2'9&quot; / 33&quot;</td>
<td>82.6 to 85.0</td>
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<td>2'10&quot; / 34&quot;</td>
<td>85.1 to 87.5</td>
</tr>
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<td>11</td>
<td>2'11&quot; / 35&quot;</td>
<td>87.6 to 90.1</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
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<table>
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<th>Height</th>
<th>Range (cm.)</th>
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</thead>
<tbody>
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<td>90.2 to 92.6</td>
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<tr>
<td>01</td>
<td>3'1&quot; / 37&quot;</td>
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</tr>
<tr>
<td>03</td>
<td>3'3&quot; / 39&quot;</td>
<td>97.8 to 100.2</td>
</tr>
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<td>04</td>
<td>3'4&quot; / 40&quot;</td>
<td>100.3 to 102.8</td>
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<tr>
<td>05</td>
<td>3'5&quot; / 41&quot;</td>
<td>102.9 to 105.3</td>
</tr>
<tr>
<td>06</td>
<td>3'6&quot; / 42&quot;</td>
<td>105.4 to 107.9</td>
</tr>
<tr>
<td>07</td>
<td>3'7&quot; / 43&quot;</td>
<td>108.0 to 110.4</td>
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<td>08</td>
<td>3'8&quot; / 44&quot;</td>
<td>110.5 to 112.9</td>
</tr>
<tr>
<td>09</td>
<td>3'9&quot; / 45&quot;</td>
<td>113.0 to 115.5</td>
</tr>
<tr>
<td>10</td>
<td>3'10&quot; / 46&quot;</td>
<td>115.6 to 118.0</td>
</tr>
<tr>
<td>11</td>
<td>3'11&quot; / 47&quot;</td>
<td>118.1 to 120.6</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td></td>
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Go to HWT_Q3
**HWT_N2D**

**INTERVIEWER:** Select the exact height.

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<th>Code</th>
<th>Height</th>
<th>Range</th>
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</thead>
<tbody>
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<td>(120.7 to 123.1 cm.)</td>
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<tr>
<td>01</td>
<td>4'1&quot; / 49&quot;</td>
<td>(123.2 to 125.6 cm.)</td>
</tr>
<tr>
<td>02</td>
<td>4'2&quot; / 50&quot;</td>
<td>(125.7 to 128.2 cm.)</td>
</tr>
<tr>
<td>03</td>
<td>4'3&quot; / 51&quot;</td>
<td>(128.3 to 130.7 cm.)</td>
</tr>
<tr>
<td>04</td>
<td>4'4&quot; / 52&quot;</td>
<td>(130.8 to 133.3 cm.)</td>
</tr>
<tr>
<td>05</td>
<td>4'5&quot; / 53&quot;</td>
<td>(133.4 to 135.8 cm.)</td>
</tr>
<tr>
<td>06</td>
<td>4'6&quot; / 54&quot;</td>
<td>(135.9 to 138.3 cm.)</td>
</tr>
<tr>
<td>07</td>
<td>4'7&quot; / 55&quot;</td>
<td>(138.4 to 140.9 cm.)</td>
</tr>
<tr>
<td>08</td>
<td>4'8&quot; / 56&quot;</td>
<td>(141.0 to 143.4 cm.)</td>
</tr>
<tr>
<td>09</td>
<td>4'9&quot; / 57&quot;</td>
<td>(143.5 to 146.0 cm.)</td>
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<td>10</td>
<td>4'10&quot; / 58&quot;</td>
<td>(146.1 to 148.5 cm.)</td>
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<tr>
<td>11</td>
<td>4'11&quot; / 59&quot;</td>
<td>(148.6 to 151.0 cm.)</td>
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<tr>
<td></td>
<td>DK, RF</td>
<td></td>
</tr>
</tbody>
</table>

Go to HWT_Q3

**HWT_N2E**

**INTERVIEWER:** Select the exact height.

<table>
<thead>
<tr>
<th>Code</th>
<th>Height</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>5'0&quot;</td>
<td>(151.1 to 153.6 cm.)</td>
</tr>
<tr>
<td>01</td>
<td>5'1&quot;</td>
<td>(153.7 to 156.1 cm.)</td>
</tr>
<tr>
<td>02</td>
<td>5'2&quot;</td>
<td>(156.2 to 158.7 cm.)</td>
</tr>
<tr>
<td>03</td>
<td>5'3&quot;</td>
<td>(158.8 to 161.2 cm.)</td>
</tr>
<tr>
<td>04</td>
<td>5'4&quot;</td>
<td>(161.3 to 163.7 cm.)</td>
</tr>
<tr>
<td>05</td>
<td>5'5&quot;</td>
<td>(163.8 to 166.3 cm.)</td>
</tr>
<tr>
<td>06</td>
<td>5'6&quot;</td>
<td>(166.4 to 168.8 cm.)</td>
</tr>
<tr>
<td>07</td>
<td>5'7&quot;</td>
<td>(168.9 to 171.4 cm.)</td>
</tr>
<tr>
<td>08</td>
<td>5'8&quot;</td>
<td>(171.5 to 173.9 cm.)</td>
</tr>
<tr>
<td>09</td>
<td>5'9&quot;</td>
<td>(174.0 to 176.4 cm.)</td>
</tr>
<tr>
<td>10</td>
<td>5'10&quot;</td>
<td>(176.5 to 179.0 cm.)</td>
</tr>
<tr>
<td>11</td>
<td>5'11&quot;</td>
<td>(179.1 to 181.5 cm.)</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td></td>
</tr>
</tbody>
</table>

Go to HWT_Q3
**Canadian Community Health Survey (CCHS)**

**Annual Component - 2010 Questionnaire**

<table>
<thead>
<tr>
<th>HWT_N2F</th>
<th>INTERVIEWER: Select the exact height.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HWT_2F</td>
<td></td>
</tr>
<tr>
<td>00</td>
<td>6'0&quot; (181.6 to 184.1 cm.)</td>
</tr>
<tr>
<td>01</td>
<td>6'1&quot; (184.2 to 186.6 cm.)</td>
</tr>
<tr>
<td>02</td>
<td>6'2&quot; (186.7 to 189.1 cm.)</td>
</tr>
<tr>
<td>03</td>
<td>6'3&quot; (189.2 to 191.7 cm.)</td>
</tr>
<tr>
<td>04</td>
<td>6'4&quot; (191.8 to 194.2 cm.)</td>
</tr>
<tr>
<td>05</td>
<td>6'5&quot; (194.3 to 196.8 cm.)</td>
</tr>
<tr>
<td>06</td>
<td>6'6&quot; (196.9 to 199.3 cm.)</td>
</tr>
<tr>
<td>07</td>
<td>6'7&quot; (199.4 to 201.8 cm.)</td>
</tr>
<tr>
<td>08</td>
<td>6'8&quot; (201.9 to 204.4 cm.)</td>
</tr>
<tr>
<td>09</td>
<td>6'9&quot; (204.5 to 206.9 cm.)</td>
</tr>
<tr>
<td>10</td>
<td>6'10&quot; (207.0 to 209.5 cm.)</td>
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<tr>
<td>11</td>
<td>6'11&quot; (209.6 to 212.0 cm.)</td>
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<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HWT_Q3</th>
<th><strong>How much ^DOVERB ^YOU2 weigh?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>HWT_3</td>
<td>INTERVIEWER: Enter amount only.</td>
</tr>
<tr>
<td></td>
<td>[ ] [ ] [ ] Weight</td>
</tr>
<tr>
<td></td>
<td>(MIN: 1) (MAX: 575)</td>
</tr>
<tr>
<td></td>
<td>DK, RF (Go to HWT_END)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HWT_N4</th>
<th>INTERVIEWER: Was that in pounds or kilograms?</th>
</tr>
</thead>
<tbody>
<tr>
<td>HWT_N4</td>
<td>1 Pounds</td>
</tr>
<tr>
<td></td>
<td>2 Kilograms</td>
</tr>
<tr>
<td></td>
<td>(DK, RF are not allowed)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HWT_E4</th>
<th>An unusual value has been entered. Please confirm.</th>
</tr>
</thead>
</table>

**Note:**

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)).

<table>
<thead>
<tr>
<th>HWT_C4</th>
<th>If proxy interview, go to HWT_END. Otherwise, go to HWT_Q4.</th>
</tr>
</thead>
</table>

Page 18 of 378
HWT_Q4

Do you consider yourself:

HWT_4

INTERVIEWER: Read categories to respondent.

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

HWT_END
Chronic conditions (CCC)

**CCC_BEG**  Core content

**CCC_C011**  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?

<table>
<thead>
<tr>
<th>Code</th>
<th>Response</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>(Go to CCC_B037)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>(Go to CCC_B037)</td>
</tr>
<tr>
<td></td>
<td>DK</td>
<td>(Go to CCC_B037)</td>
</tr>
<tr>
<td></td>
<td>RF</td>
<td>(Go to CCC_END)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**CCC_B037**  Call sub-bloc “Fibromyalgia” (CC3)

**CCC_C051**  If age < 14, go to CCC_Q061. Otherwise, go to CCC_Q051.
^DOVERB_C ^YOU1 have arthritis, excluding fibromyalgia?

1  Yes
2  No
   DK, RF

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

1  Yes
2  No
   DK, RF

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
   RF (Go to CCC_Q081)

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

1  Yes (Go to CCC_Q071)
2  No (Go to CCC_Q081)
   DK, RF (Go to CCC_Q081)

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

1  Yes
2  No
   DK, RF

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, RF (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, RF

Remember, we're interested in conditions diagnosed by a health professional. ^DOVERB_C ^YOU1 have migraine headaches?

1. Yes
2. No

DK, RF

If age < 35, go to CCC_Q101. Otherwise, go to CCC_Q091.

^DOVERB_C ^YOU2 have chronic bronchitis, emphysema or chronic obstructive pulmonary disease or COPD?

1. Yes
2. No

DK, RF

(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, RF

(Go to CCC_Q121)

How old ^WERE ^YOU1 when this was first diagnosed?

INTERVIEWER: Maximum is [current age].

| | | | Age in years

(MIN: 0) (MAX: current age)

DK, RF

If age < 15 or sex = male or CCC_Q102 < 15 or CCC_Q102 > 49, go to CCC_Q10C. Otherwise, go to CCC_Q10A.
Canadian Community Health Survey (CCHS)  
Annual Component - 2010 Questionnaire

**CCC_Q10A**  
^WERE ^YOU1 pregnant when ^YOU1 ^WERE first diagnosed with diabetes?

1. Yes
2. No (Go to CCC_Q10C)

**CCC_Q10B**  
Other than during pregnancy, has a health professional ever told ^YOU2 that ^YOU1 ^HAVE diabetes?

1. Yes
2. No (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

Note:  
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

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

1. Yes
2. No
**Canadian Community Health Survey (CCHS)**

### Annual Component - 2010 Questionnaire

**CCC_Q131**

**Have you** cancer?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Go to CCC_Q141)

**CCC_Q132**

**Have you ever been diagnosed with cancer?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CCC_Q141**

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

**Do you have intestinal or stomach ulcers?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CCC_Q151**

**Do you suffer from the effects of a stroke?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CCC_C161**

If age < 25, go to CCC_Q171. Otherwise, go to CCC_Q161.

**CCC_Q161**

**Do you suffer from urinary incontinence?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
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</tbody>
</table>

**CCC_Q171**

**Do you suffer from a bowel disorder such as Crohn’s Disease, ulcerative colitis, Irritable Bowel Syndrome or bowel incontinence?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

(Go to CCC_C181)
CCC_Q171A  What kind of bowel disease \( ^{\text{DOVERB}} \) \( ^{\text{YOU1}} \) have?

CCC_17A

1. Crohn’s Disease
2. Ulcerative colitis
3. Irritable Bowel Syndrome
4. Bowel incontinence
5. Other

   DK, RF

CCC_C181  If age < 35, go to CCC_B181.
Otherwise, go to CCC_Q181.

CCC_Q181  \( ^{\text{DOVERB}} \) \( ^{\text{YOU2}} \) have:

CCC_181

... Alzheimer’s Disease or any other dementia?

1. Yes
2. No

   DK, RF

CCC_B181  Call sub-bloc “Chronic fatigue syndrome and multiple chemical sensitivities” (CC4)

CCC_Q280  Remember, we’re interested in conditions diagnosed by a health professional.

CCC_280

\( ^{\text{DOVERB}} \) \( ^{\text{YOU2}} \) have a mood disorder such as depression, bipolar disorder, mania or dysthymia?

INTERVIEWER: Include manic depression.

1. Yes
2. No

   DK, RF

CCC_Q290  \( ^{\text{DOVERB}} \) \( ^{\text{YOU2}} \) have an anxiety disorder such as a phobia, obsessive-compulsive disorder or a panic disorder?

1. Yes
2. No

   DK, RF

CCC_END
**Fibromyalgia - sub-bloc (CC3)**

**CC3_BEG**  
Content block

External variables required:

- **PROXMODE**: proxy identifier, from the GR block.
- **FNAME**: first name of respondent from household block.
- **DOCC3**: do block flag, from the sample file.
- **PE_Q01**: first name of specific respondent from USU block
- **PE_Q02**: last name of specific respondent from USU block

Screen display:  
Display on header bar PE_Q01 and PE_Q02 separated by a space

**CC3_Q01**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**CC3_END**
Chronic fatigue syndrome and multiple chemical sensitivities - sub-block (CC4)

CC4_BEG

Content block

External variables required:

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DOCC4: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space

CC4_Q01

^DOVERB_C ^YOU2 have chronic fatigue syndrome?

CCC_251

1  Yes
2  No
   DK, RF

CC4_Q02

^DOVERB_C ^YOU2 suffer from multiple chemical sensitivities?

CCC_261

1  Yes
2  No
   DK, RF

CC4_END
Diabetes care (DIA)

DIA_BEG Optional Content (See Appendix 2)

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

1 Yes (Go to DIA_Q03)
2 No (Go to DIA_Q03)
   DK (Go to DIA_Q03)
   RF (Go to DIA_END)

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

DK, RF

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

1 Yes (Go to DIA_Q05)
2 No (Go to DIA_Q05)
3 No feet (Go to DIA_Q05)
   DK, RF (Go to DIA_Q05)
DIA_Q04  How many times? (In the past 12 months, has a health care professional checked ^YOUR1 feet for any sores or irritations?)

<p>| | | | | | | | | | | | | | | | |</p>
<table>
<thead>
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</table>

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

1  Yes
2  No

DIA_Q06  ^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)

DIA_Q07  When was the last time?

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
5  Never  (Go to DIA_C09)

DIA_R08  Now some questions about diabetes care not provided by a health care professional.

INTERVIEWER: Press <Enter> to continue.

DIA_Q08  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.

1  Per day
2  Per week  (Go to DIA_N08C)
3  Per month  (Go to DIA_N08D)
4  Per year  (Go to DIA_N08E)
5  Never  (Go to DIA_C09)

DK, RF  (Go to DIA_C09)
DIA_N08B  INTERVIEWER: Enter number of times per day.

DIA_N8B

____|___ Times
(MIN: 1) (MAX: 99)
DK, RF
Go to DIA_C09

DIA_N08C  INTERVIEWER: Enter number of times per week.

DIA_N8C

____|___ Times
(MIN: 1) (MAX: 99)
DK, RF
Go to DIA_C09

DIA_N08D  INTERVIEWER: Enter number of times per month.

DIA_N8D

____|___ Times
(MIN: 1) (MAX: 99)
DK, RF
Go to DIA_C09

DIA_N08E  INTERVIEWER: Enter number of times per year.

DIA_N8E

____|___ Times
(MIN: 1) (MAX: 99)
DK, RF

DIA_C09  If DIA_Q03 = 3 (no feet), go to DIA_C10.
Otherwise, go to DIA_Q09.

DIA_Q09  How often do you usually have your 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, RF     (Go to DIA_C10)

DIA_N09B  INTERVIEWER: Enter number of times per day.

DIA_N9B

____|___ Times
(MIN: 1) (MAX: 99)
DK, RF
Go to DIA_C10
DIA_N09C  INTERVIEWER: Enter number of times per week.

DIA_N9C  

|   |   | Times
(MIN: 1) (MAX: 99)
DK, RF
Go to DIA_C10

DIA_N09D  INTERVIEWER: Enter number of times per month.

DIA_N9D  

|   |   | Times
(MIN: 1) (MAX: 99)
DK, RF
Go to DIA_C10

DIA_N09E  INTERVIEWER: Enter number of times per year.

DIA_N9E  

|   |   | Times
(MIN: 1) (MAX: 99)
DK, RF

DIA_C10  If age >= 35, go to DIA_R10.
Otherwise, go to DIA_END.

DIA_R10  Now a few questions about medication.

INTERVIEWER: Press <Enter> to continue.

DIA_Q10  In the past month, did ^YOU2 take aspirin or other ASA (acetylsalicylic acid) medication every day or every second day?

|   | Yes
|   | No
|   | DK, RF

DIA_Q11  In the past month, did ^YOU1 take prescription medications such as Lipitor or Zocor to control ^YOUR1 blood cholesterol levels?

|   | Yes
|   | No
|   | DK, RF

DIA_END
Health utility index (HUI)

HUI_BEG  Theme content

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). In 2009-2010, this module is also asked to all respondents as part of the theme content.

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

HUI_R1  The next set of questions asks about YOUR 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, but it is important that we ask the same questions of everyone.

INTERVIEWER: Press <Enter> to continue.

HUI_Q01  ^ARE_C ^YOU1 usually able to see well enough to read ordinary newsprint without glasses or contact lenses?

1  Yes  (Go to HUI_Q04)
2  No  (Go to HUI_END)

HUI_Q02  ^ARE_C ^YOU1 usually able to see well enough to read ordinary newsprint with glasses or contact lenses?

1  Yes  (Go to HUI_Q04)
2  No  (Go to HUI_Q04)

HUI_Q03  ^ARE_C ^YOU1 able to see at all?

1  Yes  (Go to HUI_Q06)
2  No  (Go to HUI_Q06)

DK, RF  (Go to HUI_Q06)
HUI_Q04  ^ARE_C ^YOU1 able to see well enough to recognize a friend on the other side of the street without glasses or contact lenses?

1  Yes  (Go to HUI_Q06)
2  No  

HUI_Q05  ^ARE_C ^YOU1 usually able to see well enough to recognize a friend on the other side of the street with glasses or contact lenses?

1  Yes
2  No

HUI_Q06  ^ARE_C ^YOU2 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  

HUI_Q07  ^ARE_C ^YOU1 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

HUI_Q07A  ^ARE_C ^YOU1 able to hear at all?

1  Yes
2  No  (Go to HUI_Q10)

HUI_Q08  ^ARE_C ^YOU1 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, RF  (Go to HUI_Q10)
HUI_Q09  ^ARE_C ^YOU1 usually able to hear what is said in a conversation with one other person in a quiet room with a hearing aid?

1  Yes
2  No
   DK, RF

HUI_Q10  ^ARE_C ^YOU2 usually able to be understood completely when speaking with strangers in ^YOUR1 own language?

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

HUI_Q11  ^ARE_C ^YOU1 able to be understood partially when speaking with strangers?

1  Yes
2  No
   DK, RF

HUI_Q12  ^ARE_C ^YOU1 able to be understood completely when speaking with those who know ^HIMHER well?

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

HUI_Q13  ^ARE_C ^YOU1 able to be understood partially when speaking with those who know ^HIMHER well?

1  Yes
2  No
   DK, RF

HUI_Q14  ^ARE_C ^YOU2 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, RF  (Go to HUI_Q21)
HUI_Q15 ^ARE_C ^YOU1 able to walk at all?

HUI_15

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

HUI_Q16 ^DOVERB_C ^YOU1 require mechanical support such as braces, a cane or crutches to be able to walk around the neighbourhood?

HUI_16

1  Yes
2  No
DK, RF

HUI_Q17 ^DOVERB_C ^YOU1 require the help of another person to be able to walk?

HUI_17

1  Yes
2  No
DK, RF

HUI_Q18 ^DOVERB_C ^YOU1 require a wheelchair to get around?

HUI_18

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

HUI_Q19 How often ^DOVERB ^YOU1 use a wheelchair?

HUI_19

INTERVIEWER: Read categories to respondent.

1  Always
2  Often
3  Sometimes
4  Never
DK, RF

HUI_Q20 ^DOVERB_C ^YOU1 need the help of another person to get around in the wheelchair?

HUI_20

1  Yes
2  No
DK, RF
HUI_Q21  ^ARE_C  ^YOU2 usually able to grasp and handle small objects such as a pencil or scissors?

1  Yes  (Go to HUI_D25)
2  No    (Go to HUI_D25)

HUI_Q22  ^DOVERB_C  ^YOU1 require the help of another person because of limitations in the use of hands or fingers?

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

HUI_Q23  ^DOVERB_C  ^YOU1 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, RF

HUI_Q24  ^DOVERB_C  ^YOU1 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, RF

HUI_D25  If proxy interview,  ^DT_YSELF = "^FNAME".
Otherwise,  ^DT_YSELF = "yourself".

HUI_Q25  Would you describe  ^DT_YSELF 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, RF
### HUI_Q26

**How would you describe ^YOUR1 usual ability to remember things?**

**INTERVIEWER:** Read categories to respondent.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Able to remember most things</td>
</tr>
<tr>
<td>2</td>
<td>Somewhat forgetful</td>
</tr>
<tr>
<td>3</td>
<td>Very forgetful</td>
</tr>
<tr>
<td>4</td>
<td>Unable to remember anything at all</td>
</tr>
</tbody>
</table>

DK, RF

### HUI_Q27

**How would you describe ^YOUR1 usual ability to think and solve day-to-day problems?**

**INTERVIEWER:** Read categories to respondent.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Able to think clearly and solve problems</td>
</tr>
<tr>
<td>2</td>
<td>Having a little difficulty</td>
</tr>
<tr>
<td>3</td>
<td>Having some difficulty</td>
</tr>
<tr>
<td>4</td>
<td>Having a great deal of difficulty</td>
</tr>
<tr>
<td>5</td>
<td>Unable to think or solve problems</td>
</tr>
</tbody>
</table>

DK, RF

### HUI_END
Pain and discomfort (HUP)

HUP_BEG  Core content

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_D1  (not applicable)

HUP_R1  The next set of questions asks about the level of pain or discomfort ^YOU2 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, RF  (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, RF

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, RF
Health care utilization (HCU)

HCU_BEG  Core content

HCU_C01  If (do HCU block = 1), go to HCU_D01. Otherwise, go to HCU_END.

HCU_D01  (not applicable)

HCU_Q01AA  ^DOVERB_C ^YOU2 have a regular medical doctor?

HCU_1AA

1  Yes  (Go to HCU_D01AC)
2  No  (Go to HCU_END)

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

HCU_1BB

2  Medical doctors in the area are not taking new patients

HCU_1BC

3  Have not tried to contact one

HCU_1BD

4  Had a medical doctor who left or retired

HCU_1BE

5  Other - Specify  (Go to HCU_S01AB)

DK, RF

Go to HCU_D01A1.

HCU_S01AB  INTERVIEWER: Specify.

(80 spaces)

DK, RF

HCU_D01A1  If proxy interview, ^DT_GOVERB = "goes".
Otherwise, ^DT_GOVERB = "go".

HCU_Q01A1  Is there a place that ^YOU2 usually ^DT_GOVERB to when ^YOU1 ^ARE sick or need^S advice about ^YOUR1 health?

HCU_1A1

1  Yes
2  No  (Go to HCU_END)

DK, RF  (Go to HCU_END)
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 (for example, HealthLinks, Telehealth Ontario, Health-Line, TeleCare, Info-Santé)
6 Hospital emergency room
7 Hospital outpatient clinic
8 Other - Specify (Go to HCU_S01A2)
   DK, RF

Go to HCU_END

INTERVIEWER: Specify.

(80 spaces)
DK, RF
Go to HCU_END

(Not applicable)
HCU_Q01AC ^DOVERB_C ^YOU2 and this doctor usually speak in English, in French, or in another language?

01 English
02 French
03 Arabic
04 Chinese
05 Cree
06 German
07 Greek
08 Hungarian
09 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 (Go to HCU_S01AC)

Go to HCU_END

HCU_S01AC INTERVIEWER: Specify.

(80 spaces)

DK, RF

HCU_END
Contacts with Health Professionals (CHP)

CHP_BEG Theme content

CHP_C01 If (do CHP block = 1), go to CHP_D01. Otherwise, go to CHP_END.

CHP_D01 (not applicable)

CHP_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 <1> to continue.

CHP_Q01 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 CHP_D03)
   DK (Go to CHP_D03)
   RF (Go to CHP_END)

CHP_Q02 For how many nights in the past 12 months?

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

Note: In processing, if a respondent answered CHP_Q01 = 2, the variable CHP_Q02 is given the value of "0".

CHP_D03 If CHP_Q01 = 1, ^DT_COUNT = "Not counting when ^YOU2 ^WERE an overnight patient, in the past 12 months".
   Otherwise, ^DT_COUNT = "In the past 12 months".

CHP_D03A If age < 18, ^DT_PED = "pediatrician".
   Otherwise, ^DT_PED = "null".
^DT_COUNT, ^HAVE ^YOU2 seen, or talked to any of the following health professionals about ^YOUR1 physical, emotional or mental health:

...a family doctor, ^DT_PED or general practitioner?

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

1. Yes
2. No (Go to CHP_Q06)
   DK, RF (Go to CHP_Q06)

**CHP_Q04**

How many times (in the past 12 months)?

<table>
<thead>
<tr>
<th></th>
<th>Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>MIN</td>
<td>1</td>
</tr>
<tr>
<td>MAX</td>
<td>366</td>
</tr>
<tr>
<td>Warning after</td>
<td>12</td>
</tr>
</tbody>
</table>

DK, RF

**Note:** In processing, if a respondent answered CHP_Q03 = 2, the variable CHP_Q04 is given the value of "0".

**CHP_Q05**

Where did the most recent contact take place?

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

01. Doctor's office
02. Hospital emergency room
03. Hospital outpatient clinic (e.g., day surgery, cancer)
04. Walk-in clinic
05. Appointment clinic
06. Community health centre / CLSC
07. At work
08. At school
09. At home
10. Telephone consultation only
11. Other - Specify (Go to CHP_S05)
   DK, RF
   (Go to CHP_Q06)

**CHP_S05**

**INTERVIEWER**: Specify.

| (80 spaces) |
| DK, RF |
CHP_Q06  (^DT_COUNT, ^HAVE ^YOU2 seen, or talked to:)

...an eye specialist, such as an ophthalmologist or optometrist (about ^YOUR1 physical, emotional or mental health)?

INTERVIEWER: Include both face to face and telephone contacts.

1  Yes
2  No   (Go to CHP_D08)
    DK, RF (Go to CHP_D08)

CHP_Q07  (How many times (in the past 12 months)?)

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

Note: In processing, if a respondent answered CHP_Q06 = 2, the variable CHP_Q07 is given the value of "0".

CHP_D08  If respondent is male, ^DT_DOCTOR = "urologist". Otherwise, ^DT_DOCTOR = "gynaecologist".

CHP_Q08  (^DT_COUNT, ^HAVE ^YOU2 seen, or talked to:)

...any other medical doctor or specialist such as a surgeon, allergist, orthopaedist, ^DT_DOCTOR or psychiatrist (about ^YOUR1 physical, emotional or mental health)?

INTERVIEWER: Include both face to face and telephone contacts.

1  Yes
2  No   (Go to CHP_Q11)
    DK, RF (Go to CHP_Q11)

CHP_Q09  How many times (in the past 12 months)?

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

Note: In processing, if a respondent answered CHP_Q08 = 2, the variable CHP_Q09 is given the value of "0".
**CHP_Q10** Where did the most recent contact take place?

**CHP_10**

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

- 01 Doctor's office
- 02 Hospital emergency room
- 03 Hospital outpatient clinic (e.g. day surgery, cancer)
- 04 Walk-in clinic
- 05 Appointment clinic
- 06 Community health centre / CLSC
- 07 At work
- 08 At school
- 09 At home
- 10 Telephone consultation only
- 11 Other - Specify (Go to CHP_S10)

Go to CHP_Q11

**CHP_S10**

INTERVIEWER: Specify.

____________________________________________________
(80 spaces)
DK, RF

**CHP_Q11** "\(^{\text{DT_COUNT}}\), \(^{\text{HAVE}}\) \(^{\text{YOU}}\) seen, or talked to:

**CHP_11** ...a nurse for care or advice about \(^{\text{YOUR}}\) physical, emotional or mental health?

INTERVIEWER: Include both face to face and telephone contacts.

- 1 Yes
- 2 No (Go to CHP_Q14) (Go to CHP_Q14)

**CHP_Q12** How many times (in the past 12 months)?

**CHP_12**

\[\text{(MIN: 1) (MAX: 366; warning after 15)}\]

DK, RF

Note: In processing, if a respondent answered CHP_Q11 = 2, the variable CHP_Q12 is given the value of "0".
Where did the most recent contact take place?

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

01 Doctor’s office
02 Hospital emergency room
03 Hospital outpatient clinic (e.g. day surgery, cancer)
04 Walk-in clinic
05 Appointment clinic
06 Community health centre / CLSC
07 At work
08 At school
09 At home
10 Telephone consultation only
11 Other - Specify (Go to CHP_S13)

DK, RF

Go to CHP_Q14

**INTERVIEWER:** Specify.

(80 spaces)
DK, RF

...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 CHP_Q16)

DK, RF (Go to CHP_Q16)

How many times (in the past 12 months)?

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

Note: In processing, if a respondent answered CHP_Q14 = 2, the variable CHP_Q15 is given the value of "0".
^DT_COUNT, ^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 CHP_Q18)
    DK, RF  (Go to CHP_Q18)

How many times (in the past 12 months)?

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

Note: In processing, if a respondent answered CHP_Q16 = 2, the variable CHP_Q17 is given the value of "0".

^DT_COUNT, ^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 CHP_Q20)
    DK, RF  (Go to CHP_Q20)

How many times (in the past 12 months)?

|_|_|_|  Times
(MIN: 1) (MAX: 366; warning after 30)
DK, RF

Note: In processing, if a respondent answered CHP_Q18 = 2, the variable CHP_Q19 is given the value of "0".

^DT_COUNT, ^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 CHP_Q22)
    DK, RF  (Go to CHP_Q22)
How many times (in the past 12 months)?

Times
(MIN: 1) (MAX: 366; warning after 25)
DK, RF

Note: In processing, if a respondent answered CHP_Q20 = 2, the variable CHP_Q21 is given the value of "0".

...a social worker or counsellor (about YOUR physical, emotional or mental health)?

INTERVIEWER: Include both face to face and telephone contacts.

1 Yes
2 No (Go to CHP_Q24)
DK, RF (Go to CHP_Q24)

How many times (in the past 12 months)?

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

Note: In processing, if a respondent answered CHP_Q22 = 2, the variable CHP_Q23 is given the value of "0".

...an audiologist, speech or occupational therapist about YOUR physical, emotional or mental health?

INTERVIEWER: Include both face to face and telephone contacts.

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

How many times (in the past 12 months)?

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

Note: In processing, if a respondent answered CHP_Q24 = 2, the variable CHP_Q25 is given the value of "0".
Unmet health care needs (UCN)

UCN_BEG

Thematic content

External variables required:

PROXMODE: proxy identifier, from the GR block.
AGE: Respondent's age
HCU_Q06: Unmet health care needs
DOUCN: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space.

UCN_C10

If DOUCN = 1, go to UCN_D010.
Otherwise, go to UCN_END.

UCN_D010

UCN_Q010

<PHRASE_E>

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

UCN_Q020

Thinking of the most recent time, why didn’t ^YOU1 get care?

INTERVIEWER: Mark all that apply.

UCN_020A 01 Not available - in the area
UCN_020B 02 Not available - at time required (e.g. doctor on holidays, inconvenient hours)
UCN_020C 03 Waiting time too long
UCN_020D 04 Felt would be inadequate
UCN_020E 05 Cost
UCN_020F 06 Too busy
UCN_020G 07 Didn’t get around to it / didn’t bother
UCN_020H 08 Decided not to seek care
UCN_020I 09 Doctor - didn’t think it was necessary
UCN_020J 10 Other - Specify (Go to UCN_S020)
   DK, RF
UCN_S020  INTERVIEWER: Specify.

(80 spaces)
DK, RF

UCN_Q030  Again, thinking of the most recent time, what was the type of care that was needed?

UCN_030  INTERVIEWER: Mark all that apply.

UCN_030A  1 Treatment of - a physical health problem
UCN_030B  2 Treatment of - an emotional or mental health problem
UCN_030C  3 A regular check-up (including regular pre-natal care)
UCN_030D  4 Care of an injury
UCN_030E  5 Other - Specify  (Go to UCN_S030)

DK, RF

UCN_S030  INTERVIEWER: Specify.

(80 spaces)
DK, RF

UCN_Q040  Where did ^YOU1 try to get the service ^YOU1 ^WERE seeking?

UCN_040  INTERVIEWER: Mark all that apply.

UCN_040A  1 Doctor's office
UCN_040B  2 Community health centre / CLSC
UCN_040C  3 Walk-in clinic
UCN_040D  4 Appointment clinic
UCN_040E  5 Hospital - emergency room
UCN_040F  6 Hospital - outpatient clinic
UCN_040G  7 Other - Specify  (Go to UCN_S040)

DK, RF

UCN_S040  INTERVIEWER: Specify.

(80 spaces)
DK, RF

UCN_END
Home care services (HMC)

HMC_BEG  Optional Content (See Appendix 2)

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_D11)
   DK (Go to HMC_D11)
   RF (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 (Go to HMC_S10)
   DK, RF

Go to HMC_D11
HMC_S10

INTERVIEWER: Specify.

(80 spaces)
DK, RF

HMC_D11

If HMC_Q09 = 1, ^DT_OTHER = "other home".
Otherwise, ^DT_OTHER = "home".

HMC_Q11

^HAVE ^YOU2 received any ^DT_OTHER 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, RF (Go to HMC_Q14)

HMC_D12

(not applicable)

HMC_Q12

Who provided these ^DT_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_12G
3 Physiotherapist or other therapist from a private agency

HMC_12C
4 Neighbour or friend

HMC_12D
5 Family member or spouse

HMC_12E
6 Volunteer

HMC_12F
7 Other - Specify (Go to HMC_S12)
DK, RF

Go to HMC_Q13

HMC_S12

INTERVIEWER: Specify.

(80 spaces)
DK, RF
**HMC_Q13** What type of home care services \(^{HAVE}^{YOU1}\) received?

**HMC_13**

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

<table>
<thead>
<tr>
<th></th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Nursing care (e.g., dressing changes, preparing medications, V.O.N. visits)</td>
</tr>
<tr>
<td>2</td>
<td>Other health care services (e.g., physiotherapy, occupational or speech therapy, nutrition counselling)</td>
</tr>
<tr>
<td>3</td>
<td>Medical equipment or supplies</td>
</tr>
<tr>
<td>4</td>
<td>Personal care (e.g., bathing, foot care)</td>
</tr>
<tr>
<td>5</td>
<td>Housework (e.g., cleaning, laundry)</td>
</tr>
<tr>
<td>6</td>
<td>Meal preparation or delivery</td>
</tr>
<tr>
<td>7</td>
<td>Shopping</td>
</tr>
<tr>
<td>8</td>
<td>Respite care (i.e., caregiver relief)</td>
</tr>
<tr>
<td>9</td>
<td>Other - Specify (Go to HMC_S13)</td>
</tr>
</tbody>
</table>

**HMC_S13** Specify.

(80 spaces)

**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?

<table>
<thead>
<tr>
<th></th>
<th>Response</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No (Go to HMC_END)</td>
<td></td>
</tr>
</tbody>
</table>

DK, RF (Go to HMC_END)
HMC_Q15  Thinking of the most recent time, why didn't YOU get these services?

INTERVIEWER: Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HMC_15A</td>
<td>01 Not available - in the area</td>
</tr>
<tr>
<td>HMC_15B</td>
<td>02 Not available - at time required (e.g., inconvenient hours)</td>
</tr>
<tr>
<td>HMC_15C</td>
<td>03 Waiting time too long</td>
</tr>
<tr>
<td>HMC_15D</td>
<td>04 Felt would be inadequate</td>
</tr>
<tr>
<td>HMC_15E</td>
<td>05 Cost</td>
</tr>
<tr>
<td>HMC_15F</td>
<td>06 Too busy</td>
</tr>
<tr>
<td>HMC_15G</td>
<td>07 Didn't get around to it / didn't bother</td>
</tr>
<tr>
<td>HMC_15H</td>
<td>08 Didn't know where to go / call</td>
</tr>
<tr>
<td>HMC_15I</td>
<td>09 Language problems</td>
</tr>
<tr>
<td>HMC_15J</td>
<td>10 Personal or family responsibilities</td>
</tr>
<tr>
<td>HMC_15K</td>
<td>11 Decided not to seek services</td>
</tr>
<tr>
<td>HMC_15L</td>
<td>12 Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>HMC_15N</td>
<td>13 Did not qualify / not eligible for home care</td>
</tr>
<tr>
<td>HMC_15O</td>
<td>14 Still waiting for home care</td>
</tr>
<tr>
<td>HMC_15M</td>
<td>15 Other - Specify (Go to HMC_S15)</td>
</tr>
</tbody>
</table>

Go to HMC_Q16

HMC_S15  INTERVIEWER: Specify.

____________________________________________________
(80 spaces)
DK, RF

HMC_Q16  Again, thinking of the most recent time, what type of home care was needed?

INTERVIEWER: Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HMC_16A</td>
<td>1 Nursing care (e.g., dressing changes, preparing medications, V.O.N. visits)</td>
</tr>
<tr>
<td>HMC_16B</td>
<td>2 Other health care services (e.g., physiotherapy, occupational or speech therapy, nutrition counselling)</td>
</tr>
<tr>
<td>HMC_16I</td>
<td>3 Medical equipment or supplies</td>
</tr>
<tr>
<td>HMC_16C</td>
<td>4 Personal care (e.g., bathing, foot care)</td>
</tr>
<tr>
<td>HMC_16D</td>
<td>5 Housework (e.g., cleaning, laundry)</td>
</tr>
<tr>
<td>HMC_16E</td>
<td>6 Meal preparation or delivery</td>
</tr>
<tr>
<td>HMC_16F</td>
<td>7 Shopping</td>
</tr>
<tr>
<td>HMC_16G</td>
<td>8 Respite care (i.e., caregiver relief)</td>
</tr>
<tr>
<td>HMC_16H</td>
<td>9 Other - Specify (Go to HMC_S16)</td>
</tr>
</tbody>
</table>

Go to HMC_Q17
HMC_S16  INTERVIEWER: Specify.

(80 spaces)
DK, RF

HMC_Q17  Where did ^YOU2 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, RF                        |

HMC_END
Patient satisfaction - Health care services (PAS)

PAS_BEG
Optional Content (See Appendix 2)

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 CHP_Q01 = 1 or at least one of CHP_Q03 to CHP_Q24 = 1 (Yes), go to PAS_Q12.
Otherwise, go to PAS_Q11.

Note:
In processing, if a respondent answered CHP_Q01 = 1 or at least one of CHP_Q03 to CHP_Q24 = 1, set PAS_Q11 = 1.

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

PAS_11
1  Yes
2  No  (Go to PAS_END)
   DK, RF  (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, RF
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, RF

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_Q1A)
    DK, RF  (Go to PAS_Q1A)

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, RF  (Go to PAS_Q1A)

(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, RF
PAS_Q23  
(Thinking of this most recent hospital visit:)

PAS_23  
...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, RF

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?

PAS_31A  
1  Yes
2  No   (Go to PAS_END)
   DK, RF   (Go to PAS_END)

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

PAS_31B  
INTERVIEWER: Read categories to respondent.

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

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

PAS_32  
...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, RF
(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, RF
Patient satisfaction - Community-based care (PSC)

PSC_BEG Optional Content (See Appendix 2)

PSC_C11A 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 = (2, DK, RF) and CHP_Q01 <> 1 and all of (CHP_Q03 to CHP_Q24) <> 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, RF (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:

PSC_2

1 ... excellent?
2 ... good?
3 ... fair?
4 ... poor?
   DK, RF
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, RF
Restriction of activities (RAC)

RAC_BEG  Core content

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 ^YOUR2 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 ^YOU1 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
   RF  (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 ^YOU1 can do:

... at home?

INTERVIEWER: Read categories to respondent.

1  Sometimes
2  Often
3  Never
   DK
   RF  (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 ^YOU1 can do:) 

... at school?
1  Sometimes
2  Often
3  Never
4  Does not attend school
   DK
   RF  (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 ^YOU1 can do:)

... at work?
1  Sometimes
2  Often
3  Never
4  Does not work at a job
   DK
   RF  (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 ^YOU1 can do:)

... in other activities, for example, transportation or leisure?
1  Sometimes
2  Often
3  Never
   DK
   RF  (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_END.

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 ^YOU2 ^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.

01  Accident at home
02  Motor vehicle accident
03  Accident at work
04  Other type of accident
05  Existed from birth or genetic
06  Work conditions
07  Disease or illness
08  Ageing
09  Emotional or mental health problem or condition
10  Use of alcohol or drugs
11  Other - Specify  (Go to RAC_S5)
    DK, RF

RAC_S5

INTERVIEWER: Specify.

(80 spaces)
DK, RF

RAC_END
Activities of Daily Living (ADL)

ADL_BEG  Theme content

ADL  If do ADL block = 1, go to ADL_R01. Otherwise, go to ADL_END.

ADL_R01  The next few questions are about common daily activities. These questions may not apply to YOU2, but we need to ask the same questions of everyone.

INTERVIEWER: Press <Enter> to continue.

ADL_Q01  Because of any physical condition or mental condition or health problem, DOVERB YOU1 need the help of another person:

... with preparing meals?

1  Yes
2  No
   DK, RF

ADL_Q02  Because of any physical condition or mental condition or health problem, DOVERB YOU1 need the help of another person:

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

1  Yes
2  No
   DK, RF

ADL_Q03  Because of any physical condition or mental condition or health problem, DOVERB YOU1 need the help of another person:

... with doing everyday housework?

1  Yes
2  No
   DK, RF
Because of any physical condition or mental condition or health problem, need the help of another person:

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

1  Yes
2  No
DK, RF

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

... with moving about inside the house?

1  Yes
2  No
DK, RF

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

... with looking after personal finances such as making bank transactions or paying bills?

1  Yes
2  No
DK, RF
H1N1 Flu shot (H1N)

H1N_BEG  Content block

External variables required:

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DOH1N: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space

H1N_C1  If (do H1N = 1), go to H1N_C160.
Otherwise, go to H1N_END.

H1N_C160  If proxy interview, go to H1N_END.
Otherwise, go to H1N_R160.

H1N_R160  Now a few questions about your use of various health care services.

INTERVIEWER: Press <1> to continue.

H1N_Q160  Have you had the H1N1 flu shot?

H1N_160

1  Yes
2  No (Go to H1N_Q166)
   DK, RF (Go to H1N_END)
**H1N_Q164**  
In which month did you have your H1N1 flu shot?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>January</td>
</tr>
<tr>
<td>02</td>
<td>February</td>
</tr>
<tr>
<td>03</td>
<td>March</td>
</tr>
<tr>
<td>04</td>
<td>April</td>
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<tr>
<td>05</td>
<td>May</td>
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<tr>
<td>06</td>
<td>June</td>
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<td>07</td>
<td>July</td>
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<td>08</td>
<td>August</td>
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<td>09</td>
<td>September</td>
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<tr>
<td>10</td>
<td>October</td>
</tr>
<tr>
<td>11</td>
<td>November</td>
</tr>
<tr>
<td>12</td>
<td>December</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**H1N_C165**  
If H1N_Q164 = [current month], go to H1N_Q165. Otherwise, go to H1N_END.

**H1N_Q165**  
Was that this year or last year?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>This year</td>
</tr>
<tr>
<td>2</td>
<td>Last year</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Go to H1N_END
**What are the reasons that you have not had the H1N1 flu shot?**

**INTERVIEWER:** Mark all that apply.

- [H1N_66A] 01 Have not gotten around to it
- [H1N_66B] 02 Respondent - did not think it was necessary
- [H1N_66C] 03 Doctor - did not think it was necessary
- [H1N_66D] 04 Personal or family responsibilities
- [H1N_66E] 05 Not available - at time required
- [H1N_66F] 06 Not available - at all in the area
- [H1N_66G] 07 Waiting time was too long
- [H1N_66H] 08 Transportation - problems
- [H1N_66I] 09 Language - problem
- [H1N_66J] 10 Cost
- [H1N_66K] 11 Did not know where to go / uninformed
- [H1N_66L] 12 Fear (e.g., painful, embarrassing, find something wrong)
- [H1N_66M] 13 Bad reaction to previous shot
- [H1N_66O] 14 Unable to leave the house because of a health problem
- [H1N_66N] 15 Other - Specify

(80 spaces)

Go to H1N_END

**H1N_S166**

**INTERVIEWER:** Specify.

(80 spaces)

DK, RF

**H1N_END**
Flu shots (FLU)

FLU_BEG Core content

FLU_C1 If (do FLU block = 1), go to FLU_C160AA. Otherwise, go to FLU_END.

FLU_C160A If proxy interview, go to FLU_END. Otherwise, go to FLU_C160B.

FLU_C160B If (do H1N bloc = 1), go to FLU_Q160. Otherwise, go to FLU_R160.

FLU_R160 Now a few questions about your use of various health care services.

INTERVIEWER: Press <1> to continue.

FLU_Q160 Have you ever had a seasonal flu shot?

INTERVIEWER: Do not include the H1N1 flu shot.

1 Yes
2 No (Go to FLU_Q166)
   DK, RF (Go to FLU_END)

FLU_Q164 If FLU_Q162 = 2 or 3, go to FLU_Q166. Otherwise, go to FLU_Q164.

FLU_Q162 When did you have your last seasonal 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, RF (Go to FLU_END)
<table>
<thead>
<tr>
<th>FLU_Q164</th>
<th>In which month did you have your last seasonal flu shot?</th>
</tr>
</thead>
<tbody>
<tr>
<td>FLU_164</td>
<td>01 January</td>
</tr>
<tr>
<td></td>
<td>02 February</td>
</tr>
<tr>
<td></td>
<td>03 March</td>
</tr>
<tr>
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<td>04 April</td>
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<td>05 May</td>
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<td>06 June</td>
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<td>07 July</td>
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<td>08 August</td>
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<td>09 September</td>
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<td>10 October</td>
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<td>11 November</td>
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<tr>
<td></td>
<td>12 December</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

| FLU_C165 | If FLU_Q164 = [current month], go to FLU_Q165. Otherwise, go to FLU_END. |

<table>
<thead>
<tr>
<th>FLU_Q165</th>
<th>Was that this year or last year?</th>
</tr>
</thead>
<tbody>
<tr>
<td>FLU_165</td>
<td>1 This year</td>
</tr>
<tr>
<td></td>
<td>2 Last year</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Go to FLU_END
**FLU_Q166**  
What are the reasons that you have not had a seasonal 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>01</td>
<td>Have not gotten around to it</td>
</tr>
<tr>
<td>02</td>
<td>Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>03</td>
<td>Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>04</td>
<td>Personal or family responsibilities</td>
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<td>05</td>
<td>Not available - at time required</td>
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<td>06</td>
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<td>10</td>
<td>Cost</td>
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<tr>
<td>11</td>
<td>Did not know where to go / uninformed</td>
</tr>
<tr>
<td>12</td>
<td>Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>13</td>
<td>Bad reaction to previous shot</td>
</tr>
<tr>
<td>14</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>15</td>
<td>Other - Specify [Go to FLU_S166]</td>
</tr>
</tbody>
</table>

(Go to FLU_END)

**FLU_S166**  
**INTERVIEWER:** Specify.

(80 spaces)

DK, RF

**FLU_END**
Blood pressure check (BPC)

BPC_BEG  Optional Content (See Appendix 2)

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Have not gotten around to it</td>
</tr>
<tr>
<td>02</td>
<td>Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>03</td>
<td>Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>04</td>
<td>Personal or family responsibilities</td>
</tr>
<tr>
<td>05</td>
<td>Not available - at time required</td>
</tr>
<tr>
<td>06</td>
<td>Not available - at all in the area</td>
</tr>
<tr>
<td>07</td>
<td>Waiting time was too long</td>
</tr>
<tr>
<td>08</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>09</td>
<td>Language - problem</td>
</tr>
<tr>
<td>10</td>
<td>Cost</td>
</tr>
<tr>
<td>11</td>
<td>Did not know where to go / uninformed</td>
</tr>
<tr>
<td>12</td>
<td>Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>13</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>14</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**BPC_END**
PAP smear test (PAP)
PAP_BEG Optional Content (See Appendix 2)
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_020 Have you ever had a PAP smear test?
1 Yes
2 No (Go to PAP_Q026)
  DK, RF (Go to PAP_END)
PAP_Q022 When was the last time?
PAP_022
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, RF (Go to PAP_END)
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.

<table>
<thead>
<tr>
<th>Code</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Have not gotten around to it</td>
</tr>
<tr>
<td>02</td>
<td>Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>03</td>
<td>Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>04</td>
<td>Personal or family responsibilities</td>
</tr>
<tr>
<td>05</td>
<td>Not available - at time required</td>
</tr>
<tr>
<td>06</td>
<td>Not available - at all in the area</td>
</tr>
<tr>
<td>07</td>
<td>Waiting time was too long</td>
</tr>
<tr>
<td>08</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>09</td>
<td>Language - problem</td>
</tr>
<tr>
<td>10</td>
<td>Cost</td>
</tr>
<tr>
<td>11</td>
<td>Did not know where to go / uninformed</td>
</tr>
<tr>
<td>12</td>
<td>Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>13</td>
<td>Have had a hysterectomy</td>
</tr>
<tr>
<td>14</td>
<td>Hate / dislike having one done</td>
</tr>
<tr>
<td>15</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>16</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Note: If HWT_Q1 = 1 (pregnant), then PAP_Q026M (Have had a hysterectomy) should be a blank ‘fill’ (not a possible value for the interviewer).
Mammography (MAM)

MAM_BEG  Optional Content (See Appendix 2)

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, RF  (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, RF

MAM_Q032  When was the last time?

MAM_Q032  Less than 6 months ago  (Go to MAM_C038)
1  2  3  4  5  6  7  8  Other
   DK, RF  (Go to MAM_Q032)
   DK, RF  (Go to MAM_END)
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 | 01 Have not gotten around to it |
| MAM_36B | 02 Respondent - did not think it was necessary |
| MAM_36C | 03 Doctor - did not think it was necessary |
| MAM_36D | 04 Personal or family responsibilities |
| MAM_36E | 05 Not available - at time required |
| MAM_36F | 06 Not available - at all in the area |
| MAM_36G | 07 Waiting time was too long |
| MAM_36H | 08 Transportation - problems |
| MAM_36I | 09 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 (Go to MAM_S036) |

DK, RF

Go to MAM_C038

MAM_S036  INTERVIEWER: Specify.

(80 spaces)

DK, RF

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.
<table>
<thead>
<tr>
<th>MAM_Q038</th>
<th>Have you had a hysterectomy? (in other words, has your uterus been removed)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

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 and MAM_Q030 ≠ (DK, RF), the variable MAM_Q038 is given the value of 1.
Breast examinations (BRX)

BRX_BEG  Optional Content (See Appendix 2)

BRX_C1  If (do BRX block = 1), go to BRX_C110. 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) Other than a mammogram, have you ever had your breasts examined for lumps (tumours, cysts) by a doctor or other health professionals?

1  Yes  (Go to BRX_Q116)
2  No  (Go to BRX_END)
   DK, RF  (Go to BRX_END)

BRX_Q112  When was the last time?

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  (Go to BRX_END)
5  5 or more years ago  (Go to BRX_END)
   DK, RF  (Go to BRX_END)
What are the reasons that you have not had a breast exam in the past 2 years?

**INTERVIEWER:** Mark all that apply.

<table>
<thead>
<tr>
<th>Code</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRX_16A</td>
<td>01 Have not gotten around to it</td>
</tr>
<tr>
<td>BRX_16B</td>
<td>02 Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>BRX_16C</td>
<td>03 Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>BRX_16D</td>
<td>04 Personal or family responsibilities</td>
</tr>
<tr>
<td>BRX_16E</td>
<td>05 Not available - at time required</td>
</tr>
<tr>
<td>BRX_16F</td>
<td>06 Not available - at all in the area</td>
</tr>
<tr>
<td>BRX_16G</td>
<td>07 Waiting time was too long</td>
</tr>
<tr>
<td>BRX_16H</td>
<td>08 Transportation - problems</td>
</tr>
<tr>
<td>BRX_16I</td>
<td>09 Language - problem</td>
</tr>
<tr>
<td>BRX_16J</td>
<td>10 Cost</td>
</tr>
<tr>
<td>BRX_16K</td>
<td>11 Did not know where to go / uninformed</td>
</tr>
<tr>
<td>BRX_16L</td>
<td>12 Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>BRX_16N</td>
<td>13 Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>BRX_16O</td>
<td>14 Breasts removed / Mastectomy</td>
</tr>
</tbody>
</table>
| BRX_16M | 15 Other

<table>
<thead>
<tr>
<th>Code</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRX_END</td>
<td></td>
</tr>
</tbody>
</table>
Breast self-examinations (BSX)

BSX_BEG Optional Content (See Appendix 2)

BSX_C120A If (do BSX block = 1), go to BSX_C120B. 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) Have you ever examined your breasts for lumps (tumours, cysts)?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No  (Go to BSX_END)</td>
</tr>
<tr>
<td></td>
<td>DK, RF (Go to BSX_END)</td>
</tr>
</tbody>
</table>

BSX_Q121 How often?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>At least once a month</td>
</tr>
<tr>
<td>2</td>
<td>Once every 2 to 3 months</td>
</tr>
<tr>
<td>3</td>
<td>Less often than every 2 to 3 months</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

BSX_Q122 How did you learn to do this?

INTERVIEWER: Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BSX_22A</td>
<td>1 Doctor</td>
</tr>
<tr>
<td>BSX_22B</td>
<td>2 Nurse</td>
</tr>
<tr>
<td>BSX_22C</td>
<td>3 Book / magazine / pamphlet</td>
</tr>
<tr>
<td>BSX_22D</td>
<td>4 TV / video / film</td>
</tr>
<tr>
<td>BSX_22H</td>
<td>5 Family member (e.g., mother, sister, cousin)</td>
</tr>
<tr>
<td>BSX_22G</td>
<td>6 Other - Specify (Go to BSX_S122)</td>
</tr>
<tr>
<td></td>
<td>DK, RF (Go to BSX_END)</td>
</tr>
</tbody>
</table>

Go to BSX_END
BSX_S122

INTERVIEWER: Specify.

(80 spaces)
DK, RF

BSX_END
**Prostate cancer screening (PSA)**

PSA_BEG  Optional Content (See Appendix 2)

PSA_C1  If (do PSA block = 1), go to PSA_C170. 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)
   RF  (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, RF
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 (Go to PSA_S173) |

DK, RF

Go to PSA_Q174

PSA_S173  INTERVIEWER: Specify.

(80 spaces)

DK, RF

PSA_Q174  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 (Go to PSA_END)
2 No (Go to PSA_END)

DK, RF (Go to PSA_END)

PSA_Q175  When was the last time?

| PSA_175 | 1 Less than 1 year ago |
| PSA_175 | 2 1 year to less than 2 years ago |
| PSA_175 | 3 2 years to less than 3 years ago |
| PSA_175 | 4 3 years to less than 5 years ago |
| PSA_175 | 5 5 or more years ago |

DK, RF

PSA_END
Colorectal cancer screening (CCS)

CCS_BEG Optional Content (See Appendix 2)

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

CCS_180 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)
RF (Go to CCS_END)

CCS_Q182 When was the last time?

CCS_182

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, RF
**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.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Family history of colorectal cancer</td>
<td>CCS_83A</td>
</tr>
<tr>
<td>2. Part of regular check-up / routine screening</td>
<td>CCS_83B</td>
</tr>
<tr>
<td>3. Age</td>
<td>CCS_83C</td>
</tr>
<tr>
<td>4. Race</td>
<td>CCS_83G</td>
</tr>
<tr>
<td>5. Follow-up of problem</td>
<td>CCS_83D</td>
</tr>
<tr>
<td>6. Follow-up of colorectal cancer treatment</td>
<td>CCS_83E</td>
</tr>
<tr>
<td>7. Other - Specify</td>
<td>CCS_83F</td>
</tr>
</tbody>
</table>

(Go to CCS_S183)

DK, RF

Go to CCS_Q184

**CCS_S183** INTERVIEWER: Specify.

(80 spaces)

DK, RF

**CCS_Q184** 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?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Yes</td>
<td>CCS_184</td>
</tr>
<tr>
<td>2. No</td>
<td>(Go to CCS_END)</td>
</tr>
</tbody>
</table>

DK, RF

(Go to CCS_END)

**CCS_Q185** When was the last time?

<table>
<thead>
<tr>
<th>Time</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Less than 1 year ago</td>
<td>CCS_185</td>
</tr>
<tr>
<td>2. 1 year to less than 2 years ago</td>
<td></td>
</tr>
<tr>
<td>3. 2 years to less than 3 years ago</td>
<td></td>
</tr>
<tr>
<td>4. 3 years to less than 5 years ago</td>
<td></td>
</tr>
<tr>
<td>5. 5 years to less than 10 years ago</td>
<td></td>
</tr>
<tr>
<td>6. 10 or more years ago</td>
<td></td>
</tr>
</tbody>
</table>

DK, RF
**CCS_Q186** Why did you have it?

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Family history of colorectal cancer</td>
</tr>
<tr>
<td>2</td>
<td>Part of regular check-up / routine screening</td>
</tr>
<tr>
<td>3</td>
<td>Age</td>
</tr>
<tr>
<td>4</td>
<td>Race</td>
</tr>
<tr>
<td>5</td>
<td>Follow-up of problem</td>
</tr>
<tr>
<td>6</td>
<td>Follow-up of colorectal cancer treatment</td>
</tr>
<tr>
<td>7</td>
<td>Other - Specify (Go to CCS_S186)</td>
</tr>
</tbody>
</table>

DK, RF

Go to CCS_C187

**CCS_S186** **INTERVIEWER:** Specify.

____________________________________________________________________________________
(80 spaces)
DK, RF

**CCS_C187** If CCS_Q180 = 1 (had a FOBT), go to CCS_Q187. Otherwise, go to CCS_END.

**CCS_Q187** Was the colonoscopy or sigmoidoscopy a follow-up of the results of an FOBT?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
</tbody>
</table>

DK, RF

**CCS_END**
Eye examinations (EYX)

EYX_BEG  Optional Content (See Appendix 2)

EYX_C140A  If (EYX block = 2) or proxy interview, go to EYX_END. Otherwise, go to EYX_C140B.

EYX_C140B  If CHP_Q06 = 2, DK or RF (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) 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, RF  (Go to EYX_END)

EYX_Q142  (Now eye examinations) 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, RF  (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.

<table>
<thead>
<tr>
<th>Option</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>EYX_46A</td>
<td>01 Have not gotten around to it</td>
</tr>
<tr>
<td>EYX_46B</td>
<td>02 Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>EYX_46C</td>
<td>03 Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>EYX_46D</td>
<td>04 Personal or family responsibilities</td>
</tr>
<tr>
<td>EYX_46E</td>
<td>05 Not available - at time required</td>
</tr>
<tr>
<td>EYX_46F</td>
<td>06 Not available - at all in the area</td>
</tr>
<tr>
<td>EYX_46G</td>
<td>07 Waiting time was too long</td>
</tr>
<tr>
<td>EYX_46H</td>
<td>08 Transportation - problems</td>
</tr>
<tr>
<td>EYX_46I</td>
<td>09 Language - problem</td>
</tr>
<tr>
<td>EYX_46J</td>
<td>10 Cost</td>
</tr>
<tr>
<td>EYX_46K</td>
<td>11 Did not know where to go / uninformed</td>
</tr>
<tr>
<td>EYX_46L</td>
<td>12 Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>EYX_46N</td>
<td>13 Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>EYX_46M</td>
<td>14 Other</td>
</tr>
</tbody>
</table>

DK, RF
Dental visits (DEN)

DEN_BEG Optional Content (See Appendix 2)

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

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

DEN_C130C If CHP_Q14 = 1, go to DEN_Q130. Otherwise, go to DEN_Q132.

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, RF (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 (Go to DEN_Q136)
   DK, RF (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.

Note: Trigger soft edit if DEN_Q132 = 1 and CHP_Q14 = 2.
DEN_C133  If DEN_Q132 = 1, go to DEN_END.
Otherwise, go to DEN_Q136.

**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>Code</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Have not gotten around to it</td>
</tr>
<tr>
<td>02</td>
<td>Respondent - did not think it was necessary</td>
</tr>
<tr>
<td>03</td>
<td>Doctor - did not think it was necessary</td>
</tr>
<tr>
<td>04</td>
<td>Personal or family responsibilities</td>
</tr>
<tr>
<td>05</td>
<td>Not available - at time required</td>
</tr>
<tr>
<td>06</td>
<td>Not available - at all in the area</td>
</tr>
<tr>
<td>07</td>
<td>Waiting time was too long</td>
</tr>
<tr>
<td>08</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>09</td>
<td>Language - problem</td>
</tr>
<tr>
<td>10</td>
<td>Cost</td>
</tr>
<tr>
<td>11</td>
<td>Did not know where to go / uninformed</td>
</tr>
<tr>
<td>12</td>
<td>Fear (e.g., painful, embarrassing, find something wrong)</td>
</tr>
<tr>
<td>13</td>
<td>Wears dentures</td>
</tr>
<tr>
<td>14</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>15</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**DEN_END**
Oral health 2 (OH2)

OH2_BEG  Optional Content (See Appendix 2)

OH2_C10A  If (do OH2 block = 1), go to OH2_C10B. 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:
OH2_10  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, RF (Go to OH2_END)

OH2_Q11  Do you have insurance that covers all or part of your dental expenses?
OH2_11  1  Yes
2  No (Go to OH2_C12)
   DK, RF (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, RF

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?

OH2_12  
1  Yes  
2  No  (Go to OH2_Q20)  
DK, RF  (Go to OH2_Q20)

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

OH2_13  
1  Yes  
2  No  
DK, RF

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

OH2_20  
1  Yes  
2  No  
DK, RF

OH2_C21  If DEN_Q136 = 13, go to OH2_D22.  
Otherwise, go to OH2_Q21.

OH2_Q21  Do you wear dentures or false teeth?

OH2_21  
1  Yes  
2  No  
DK, RF

Note:  In processing, if a respondent answered DEN_Q136 = 13 and OH2_Q10 Not in (DK, RF), 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_D22  If OH2_Q21= 1 or DEN_Q136 = 13, ^DT_TEETH = "teeth, mouth or dentures".  
Otherwise, ^DT_TEETH = "teeth or mouth".

OH2_Q22  Because of the condition of your ^DT_TEETH, do you have difficulty pronouncing any words or speaking clearly?

OH2_22  
1  Yes  
2  No  
DK, RF
In the past 12 months, how often have you avoided:

...conversation or contact with other people, because of the condition of your ^DT_TEETH?

INTERVIEWER: Read categories to respondent.

1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF

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

...laughing or smiling, because of the condition of your ^DT_TEETH?

1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF

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, RF

In the past month, were your teeth:

...sensitive to hot or cold food or drinks?

1  Yes
2  No
   DK, RF
OH2_Q25C  In the past month, have you had:
OH2_25C  ...pain in or around the jaw joints?
1  Yes
2  No
   DK, RF

OH2_Q25D  (In the past month, have you had:)
OH2_25D  ...other pain in the mouth or face?
1  Yes
2  No
   DK, RF

OH2_Q25E  (In the past month, have you had:)
OH2_25E  ...bleeding gums?
1  Yes
2  No
   DK, RF

OH2_Q25F  (In the past month, have you had:)
OH2_25F  ...dry mouth?
   INTERVIEWER: Do not include thirst caused by exercise.
1  Yes
2  No
   DK, RF

OH2_Q25G  (In the past month, have you had:)
OH2_25G  ...bad breath?
1  Yes
2  No
   DK, RF

OH2_C30  If OH2_Q20 = 1, go to OH2_Q30.
Otherwise, go to OH2_END.
**How often do you brush your teeth?**

1. More than twice a day
2. Twice a day
3. Once a day
4. Less than once a day but more than once a week
5. Once a week
6. Less than once a week

DK, RF
Food choices (FDC)
FDC_BEG Optional Content (See Appendix 2)

FDC_C1A If (do FDC block = 1), go to FDC_C1B. 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, RF (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, RF

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, RF

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, RF
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>FDC_Q2A</td>
<td>Do you choose certain foods because of:</td>
</tr>
<tr>
<td></td>
<td>...the lower fat content?</td>
</tr>
<tr>
<td>1</td>
<td>Yes (or sometimes)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
<tr>
<td>FDC_Q2B</td>
<td>Do you choose certain foods because of:</td>
</tr>
<tr>
<td></td>
<td>...the fibre content?</td>
</tr>
<tr>
<td>1</td>
<td>Yes (or sometimes)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
<tr>
<td>FDC_Q2C</td>
<td>Do you choose certain foods because of:</td>
</tr>
<tr>
<td></td>
<td>...the calcium content?</td>
</tr>
<tr>
<td>1</td>
<td>Yes (or sometimes)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
<tr>
<td>FDC_Q3A</td>
<td>Do you avoid certain foods because of:</td>
</tr>
<tr>
<td></td>
<td>...the fat content?</td>
</tr>
<tr>
<td>1</td>
<td>Yes (or sometimes)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
<tr>
<td>FDC_Q3B</td>
<td>Do you avoid certain foods because of:</td>
</tr>
<tr>
<td></td>
<td>...the type of fat they contain?</td>
</tr>
<tr>
<td>1</td>
<td>Yes (or sometimes)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
<tr>
<td>FDC_Q3C</td>
<td>Do you avoid certain foods because of:</td>
</tr>
<tr>
<td></td>
<td>...the salt content?</td>
</tr>
<tr>
<td>1</td>
<td>Yes (or sometimes)</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>
(Do you avoid certain foods because of:)

---

**FDC_Q3D**

**FDC_3D**

...the cholesterol content?

1. Yes (or sometimes)
2. No
   DK, RF

---

**FDC_Q3E**

**FDC_3E**

...the calorie content?

1. Yes (or sometimes)
2. No
   DK, RF
Dietary supplement use - Vitamins and minerals (DSU)

DSU_BEG  Optional Content (See Appendix 2)

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, RF      (Go to DSU_END)

DSU_Q1B  Did you take them at least once a week?

DSU_1B  

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

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

DSU_1C  

   || Days
   (MIN: 1) (MAX: 7)
   DK, RF
   Go to DSU_END

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

DSU_1D  

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

DSU_END
Fruit and vegetable consumption (FVC)

FVC_BEG
Core content

FVC_C1A
If (do FVC block = 2) or proxy interview, go to FVC_END. 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, RF (Go to FVC_END)

FVC_N1B
INTERVIEWER: Enter number of times per day.

| | | Times
(MIN: 1) (MAX: 20)
DK, RF
Go to FVC_Q2A

FVC_N1C
INTERVIEWER: Enter number of times per week.

| | | Times
(MIN: 1) (MAX: 90)
DK, RF
Go to FVC_Q2A

FVC_N1D
INTERVIEWER: Enter number of times per month.

| | | | | Times
(MIN: 1) (MAX: 200)
DK, RF
Go to FVC_Q2A
FVC_N1E | INTERVIEWER: Enter number of times per year.
FVC_1E

______ Times
(MIN: 1) (MAX: 500)
DK, RF

FVC_Q2A | Not counting juice, how often do you usually eat fruit?
FVC_2A

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, RF  (Go to FVC_Q3A)

FVC_N2B | INTERVIEWER: Enter number of times per day.
FVC_2B

______ Times
(MIN: 1) (MAX: 20)
DK, RF
Go to FVC_Q3A

FVC_N2C | INTERVIEWER: Enter number of times per week.
FVC_2C

______ Times
(MIN: 1) (MAX: 90)
DK, RF
Go to FVC_Q3A

FVC_N2D | INTERVIEWER: Enter number of times per month.
FVC_2D

______ Times
(MIN: 1) (MAX: 200)
DK, RF
Go to FVC_Q3A

FVC_N2E | INTERVIEWER: Enter number of times per year.
FVC_2E

______ Times
(MIN: 1) (MAX: 500)
DK, RF
**FVC_Q3A**

**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, RF** (Go to FVC_Q4A)

---

**FVC_N3B**

**INTERVIEWER:** Enter number of times per day.

- Times
  - (MIN: 1) (MAX: 20)
  - DK, RF
  - Go to FVC_Q4A

---

**FVC_N3C**

**INTERVIEWER:** Enter number of times per week.

- Times
  - (MIN: 1) (MAX: 90)
  - DK, RF
  - Go to FVC_Q4A

---

**FVC_N3D**

**INTERVIEWER:** Enter number of times per month.

- Times
  - (MIN: 1) (MAX: 200)
  - DK, RF
  - Go to FVC_Q4A

---

**FVC_N3E**

**INTERVIEWER:** Enter number of times per year.

- Times
  - (MIN: 1) (MAX: 500)
  - DK, RF

---

**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, RF** (Go to FVC_Q5A)
FVC_N4B

INTERVIEWER: Enter number of times per day.

FVC_4B

| | | Times
(MIN: 1) (MAX: 20)
DK, RF
Go to FVC_Q5A

FVC_N4C

INTERVIEWER: Enter number of times per week.

FVC_4C

| | | Times
(MIN: 1) (MAX: 90)
DK, RF
Go to FVC_Q5A

FVC_N4D

INTERVIEWER: Enter number of times per month.

FVC_4D

| | | | Times
(MIN: 1) (MAX: 200)
DK, RF
Go to FVC_Q5A

FVC_N4E

INTERVIEWER: Enter number of times per year.

FVC_4E

| | | | Times
(MIN: 1) (MAX: 500)
DK, RF

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)
DK, RF        (Go to FVC_Q6A)

FVC_N5B

INTERVIEWER: Enter number of times per day.

FVC_5B

| | | Times
(MIN: 1) (MAX: 20)
DK, RF
Go to FVC_Q6A
FVC_N5C

INTERVIEWER: Enter number of times per week.

FVC_5C

||| Times
(MIN: 1) (MAX: 90)
DK, RF
Go to FVC_Q6A

FVC_N5D

INTERVIEWER: Enter number of times per month

FVC_5D

||| Times
(MIN: 1) (MAX: 200)
DK, RF
Go to FVC_Q6A

FVC_N5E

INTERVIEWER: Enter number of times per year.

FVC_5E

||| Times
(MIN: 1) (MAX: 500)
DK, RF

FVC_Q6A

Not counting carrots, potatoes, or salad, how many servings of other vegetables do you usually eat?

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

1 Per day
2 Per week (Go to FVC_N6C)
3 Per month (Go to FVC_N6D)
4 Per year (Go to FVC_N6E)
5 Never (Go to FVC_END)
DK, RF (Go to FVC_END)

FVC_N6B

INTERVIEWER: Enter number of servings per day.

FVC_6B

||| Servings
(MIN: 1) (MAX: 20)
DK, RF
Go to FVC_END

FVC_N6C

INTERVIEWER: Enter number of servings per week.

FVC_6C

||| Servings
(MIN: 1) (MAX: 90)
DK, RF
Go to FVC_END
FVC_N6D

**INTERVIEWER:** Enter number of servings per month.

<table>
<thead>
<tr>
<th>Servings</th>
<th>(MIN: 1) (MAX: 200)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK, RF</td>
<td>Go to FVC_END</td>
</tr>
</tbody>
</table>

FVC_6D

FVC_N6E

**INTERVIEWER:** Enter number of servings per year.

<table>
<thead>
<tr>
<th>Servings</th>
<th>(MIN: 1) (MAX: 500)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK, RF</td>
<td></td>
</tr>
</tbody>
</table>

FVC_6E

FVC_END
**Physical activities (PAC)**

**PAC_BEG**
Core content

**PAC_C1A**
If (do PAC block = 1), go to PAC_C1B. Otherwise, go to PAC_END.

**PAC_C1B**
If proxy interview, go to PAC_END. Otherwise, go to PAC_R1.

**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.

<table>
<thead>
<tr>
<th>PAC_1A</th>
<th>01 Walking for exercise</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAC_1B</td>
<td>02 Gardening or yard work</td>
</tr>
<tr>
<td>PAC_1C</td>
<td>03 Swimming</td>
</tr>
<tr>
<td>PAC_1D</td>
<td>04 Bicycling</td>
</tr>
<tr>
<td>PAC_1E</td>
<td>05 Popular or social dance</td>
</tr>
<tr>
<td>PAC_1F</td>
<td>06 Home exercises</td>
</tr>
<tr>
<td>PAC_1G</td>
<td>07 Ice hockey</td>
</tr>
<tr>
<td>PAC_1H</td>
<td>08 Ice skating</td>
</tr>
<tr>
<td>PAC_1I</td>
<td>09 In-line skating or rollerblading</td>
</tr>
<tr>
<td>PAC_1J</td>
<td>10 Jogging or running</td>
</tr>
<tr>
<td>PAC_1K</td>
<td>11 Golfing</td>
</tr>
<tr>
<td>PAC_1L</td>
<td>12 Exercise class or aerobics</td>
</tr>
<tr>
<td>PAC_1M</td>
<td>13 Downhill skiing or snowboarding</td>
</tr>
<tr>
<td>PAC_1N</td>
<td>14 Bowling</td>
</tr>
<tr>
<td>PAC_1O</td>
<td>15 Baseball or softball</td>
</tr>
<tr>
<td>PAC_1P</td>
<td>16 Tennis</td>
</tr>
<tr>
<td>PAC_1Q</td>
<td>17 Weight-training</td>
</tr>
<tr>
<td>PAC_1R</td>
<td>18 Fishing</td>
</tr>
<tr>
<td>PAC_1S</td>
<td>19 Volleyball</td>
</tr>
<tr>
<td>PAC_1T</td>
<td>20 Basketball</td>
</tr>
<tr>
<td>PAC_1Z</td>
<td>21 Soccer</td>
</tr>
<tr>
<td>PAC_1U</td>
<td>22 Any other</td>
</tr>
<tr>
<td>PAC_1V</td>
<td>23 No physical activity</td>
</tr>
</tbody>
</table>

DK, RF (Go to PAC_END)
PAC_E1  You cannot select "No physical activity" and another category. Please return and correct.

Note: Trigger hard edit if "No physical activity" is chosen in PAC_Q1 with any other response.

PAC_C1VA  If PAC_Q1 = 23 only, go to PAC_R7. Otherwise, go to PAC_C1VB.

PAC_C1VB  If PAC_Q1 = 22, go to PAC_S1V. Otherwise, go to PAC_Q2n.

PAC_S1V  What was this activity?

INTERVIEWER: Enter one activity only.

________________________________________________________________________________________
(80 spaces)
(DK, RF are not allowed)

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

PAC_1W

1  Yes
2  No    (Go to PAC_Q2n)
     DK, RF    (Go to PAC_Q2n)

PAC_S1X  What was this activity?

INTERVIEWER: Enter one activity only.

________________________________________________________________________________________
(80 spaces)
(DK, RF are not allowed)

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

PAC_1X

1  Yes
2  No    (Go to PAC_Q2n)
     DK, RF    (Go to PAC_Q2n)
PAC_S1Y What was this activity?

**INTERVIEWER:** Enter one activity only.

________________________________________________________________________________
(80 spaces)

DK, RF (Go to PAC_Q2n)

**Note:** For each activity identified in PAC_Q1, ask PAC_Q2n and PAC_Q3n. When PAC_S1X or PAC_S1Y = DK, RF, their respective PAC_Q2 and PAC_Q3 will not be asked.

**PAC_Q2N** In the past 3 months, how many times did you [participate in identified activity]?

**PAC_2N**

<table>
<thead>
<tr>
<th>Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>(MIN: 1) (MAX: 99; for each activity except the following: Walking: MAX = 270, Bicycling: MAX = 200, Other activities: MAX = 200)</td>
</tr>
</tbody>
</table>

DK, RF (Go to next activity)

**PAC_Q3N** About how much time did you spend on each occasion?

**PAC_3N**

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

DK, RF

**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.

**PAC_D7** If PAC_Q2n > 0, where n = 1, X = PAC_Q2n, "DT_TIMEW = "Other than the (X) times you already reported walking for exercise was there any other time". Otherwise, "DT_TIMEW = "Was there any time".

**PAC_Q7** DT_TIMEW in the past 3 months when you walked to and from work or school?

**PAC_7**

1. Yes
2. No (Go to PAC_D8)
3. Does not work or go to school (Go to PAC_END)

DK, RF (Go to PAC_D8)
**Canadian Community Health Survey (CCHS)**

**Annual Component - 2010 Questionnaire**

**PAC_Q7A**

How many times?

**PAC_7A**

| | | | Times
| MIN: 1 | MAX: 270 |
| DK, RF | (Go to PAC_D8) |

**PAC_Q7B**

About how much time did you spend on each occasion?

**PAC_7B**

**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

**PAC_D8**

If PAC_Q2n > 0, where n = 4, X = PAC_Q2n, ^DT_TIMEB = "Other than the (X) times you already reported bicycling was there any other time". Otherwise, ^DT_TIMEB = "Was there any time".

**PAC_Q8**

^DT_TIMEB in the past 3 months when you bicycled to and from work or school?

**PAC_8**

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

**Note:** If PAC_Q7 = 3, PAC_Q8 will be filled with "Does not work or go to school" in processing (PAC_Q8 = 3).

**PAC_Q8A**

How many times?

**PAC_8A**

| | | | Times
| MIN: 1 | MAX: 200 |
| DK, RF | (Go to PAC_END) |

**PAC_Q8B**

About how much time did you spend on each occasion?

**PAC_8B**

**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

**PAC_END**
Sedentary activities (SAC)

SAC_BEG  Optional Content (See Appendix 2)

SAC_C1A  If (do SAC block = 1), go to SAC_C1B. 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 <1> to continue.

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

... on a computer, including playing computer games and using the Internet?

INTERVIEWER: Do not include time spent at work or at school.

|   |   |   |   | Hours
(MIN: 0) (MAX: 70; warning after 35)
DK, RF (Go to SAC_END)

SAC_C2  If age > 25, go to SAC_Q3. Otherwise, go to SAC_Q2.

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

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

|   |   |   |   | Hours
(MIN: 0) (MAX: 70; warning after 35)
DK, RF

SAC_E1  An impossible value has been entered. Please return and correct.

Note: Trigger hard edit if SAC_Q1 + SAC_Q2 > 98.
SAC_Q3  
(In a typical week in the past 3 months, how much time did you usually spend:)
SAC_3
...watching television or videos?
  |___| Hours
  (MIN: 0) (MAX: 70; warning after 35)
  DK, RF

SAC_E2  
An impossible value has been entered. Please return and correct.

Note:  
Trigger hard edit if SAC_Q1 + SAC_Q2 + SAC_Q3 > 98.

SAC_Q4  
(In a typical week, in the past 3 months, how much time did you usually spend:)
SAC_4
...reading, not counting at work or at school?
  INTERVIEWER: Include books, magazines, newspapers, homework.
  |___| Hours
  (MIN: 0) (MAX: 70; warning after 35)
  DK, RF

SAC_E3  
An impossible value has been entered. Please return and correct.

Note:  
Trigger hard edit if SAC_Q1 + SAC_Q2 + SAC_Q3 + SAC_Q4 > 98.
Use of protective equipment (UPE)

UPE_BEG  Theme content

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

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 = 7 (ice hockey) 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_C1D.

UPE_R1  Now a few questions about precautions you take while participating in some 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_Q1A.

UPE_Q1A  In the past 12 months, have you done any bicycling?

UPE_01A

1  Yes
2  No  (Go to UPE_C2)
3  DK  (Go to UPE_C2)
4  RF  (Go to UPE_END)

UPE_Q1  When riding a bicycle, how often do you wear a helmet?

UPE_01

INTERVIEWER: Read categories to respondent.

1  Always
2  Most of the time
3  Rarely
4  Never
DK, RF
UPE_C2  If PAC_Q1 = 9 (in-line skating or rollerblading), go to UPE_Q2A. Otherwise, go to UPE_Q2.

UPE_Q2  In the past 12 months, have you done any in-line skating or rollerblading?

UPE_02  
1  Yes
2  No  (Go to UPE_C3A)
  DK, RF  (Go to UPE_C3A)

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

UPE_02A  INTERVIEWER: Read categories to respondent.

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

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

UPE_02B  
1  Always
2  Most of the time
3  Rarely
4  Never
  DK, RF

UPE_Q2C  How often do you wear elbow pads?

UPE_02C  
1  Always
2  Most of the time
3  Rarely
4  Never
  DK, RF

UPE_Q2D  How often do you wear knee pads?

UPE_02D  
1  Always
2  Most of the time
3  Rarely
4  Never
  DK, RF
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, RF (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_C6)
   
   DK, RF (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, RF

**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 respondent.

1. **Always**
2. **Most of the time**
3. **Rarely**
4. **Never**
   
   DK, RF
UPE_Q5B  How often do you wear wrist guards or wrist protectors?
UPE_05B
1  Always
2  Most of the time
3  Rarely
4  Never
   DK, RF

UPE_C6  If age >= 12 or <= 19, go to UPE_Q6. Otherwise, go to UPE_C7.

UPE_Q6  In the past 12 months, have you done any skateboarding?
UPE_06
1  Yes
2  No  (Go to UPE_C7)
   DK, RF  (Go to UPE_C7)

UPE_Q6A  How often do you wear a helmet?
UPE_06A
INTERVIEWER: Read categories to respondent.
1  Always
2  Most of the time
3  Rarely
4  Never
   DK, RF

UPE_Q6B  How often do you wear wrist guards or wrist protectors?
UPE_06B
1  Always
2  Most of the time
3  Rarely
4  Never
   DK, RF

UPE_Q6C  How often do you wear elbow pads?
UPE_06C
1  Always
2  Most of the time
3  Rarely
4  Never
   DK, RF
If PAC Q1=7 (ice hockey), go to UPE_Q7A. Otherwise, go to UPE_Q7.

In the past 12 months, have you played any ice hockey?

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

When playing ice hockey, how often do you wear a mouth guard?

INTERVIEWER: Read categories to respondent.

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

SSB_BEG Optional Content (See Appendix 2)

SSB_C1 If (do SSB block = 1), go to SSB_C2. Otherwise, go to SSB_END.

SSB_C2 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?

SSB_01

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

SSB_Q02 Did any of your sunburns involve blistering?

SSB_02

1 Yes
2 No
DK, RF

SSB_Q03 Did any of your sunburns involve pain or discomfort that lasted for more than 1 day?

SSB_03

1 Yes
2 No
DK, RF

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  
2. Less than 30 minutes  
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, RF  

SSB_Q07  
**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  
DK, RF

SSB_Q08  
**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:**

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

1. Always  
2. Often  
3. Sometimes  
4. Rarely  
5. Never  
DK, RF

SSB_Q09A  
**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:**

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

1. Always  
2. Often  
3. Sometimes  
4. Rarely  
5. Never  
DK, RF
(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 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
4 DK, RF

...use sunscreen on your body?

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

Do you have skin cancer?

1 Yes
2 No
4 DK, RF (Go to SSB_END)
SSB_E13  Inconsistent answers have been entered. The respondent reported having skin cancer but previously reported that he/she did not have cancer. Please confirm.

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

SSB_C14  If SSB_Q13 = 1, go to SSB_Q15. Otherwise, go to SSB_Q14.

SSB_Q14  Have you ever been diagnosed with skin cancer?

SSB_14

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

SSB_E14  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.

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

SSB_D15  If SSB_Q13 = 1 (Yes), ^DT_DODID = "do".
         Otherwise, ^DT_DODID = "did".

SSB_Q15  What type of skin cancer ^DT_DODID you have?

SSB_15

1  Melanoma
2  Non-melanoma
   DK, RF

SSB_END
Injuries (INJ)

INJ_BEG
Theme content

INJ_C1
If (do INJ block = 1), go to INJ_B1.
Otherwise, go to INJ_END.

INJ_B1
Call "Repetitive strain" sub block (REP)

Note:
Number of injuries and details of most serious injury

INJ_D1A
If REP_Q1 = 1 (Yes), ^DT_OTHINJ = "other".
Otherwise, ^DT_OTHINJ = "null".

INJ_D1B
(not applicable)

INJ_R1
Now some questions about ^DT_OTHINJ injuries which occurred in the past 12 months, and were serious enough to limit ^YOUR2 normal activities the day after the injury occurred. For example, a broken bone, a bad cut, a burn or a sprain.

INTERVIEWER: Press <Enter> to continue.

INJ_D01
If REP_Q1 = 1 (Yes), ^DT_INJURIES1 = "Not counting repetitive strain injuries or food poisoning."
Otherwise, ^DT_INJURIES1 = "Not counting food poisoning."

INJ_Q01
^DT_INJURIES1 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, RF (Go to INJ_END)

INJ_Q02
How many times ^WERE ^YOU1 injured?

INJ_02

1 ___ ___ Times
(MIN: 1) (MAX: 30; warning after 6)
DK, RF (Go to INJ_END)

INJ_D03
If INJ_Q02 = 1 (one injury), ^DT_INJURIES2 = "In which".
Otherwise, ^DT_INJURIES2 = "Thinking about the most serious injury, in which".
INJ_Q03
^DT_INJURIES2 month did it happen?

INJ_03
01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
DK, RF (Go to INJ_Q05)

INJ_C04
If INJ_Q03 = « C_MONTH », go to INJ_Q04.
Otherwise, go to INJ_Q05.

INJ_Q04
Was that this year or last year?

INJ_04
1 This year
2 Last year
DK, RF

INJ_Q05
What type of injury did YOU1 have? For example, a broken bone or burn.

INJ_05
01 Multiple serious injuries (excluding multiple minor injuries)
02 Broken or fractured bones
03 Burn, scald, chemical burn
04 Dislocation
05 Strain or strain (including torn ligaments and muscles)
06 Cut, puncture, animal or human bite (open wound)
07 Scrape(s), bruise(s), blister(s) (including multiple minor injuries)
08 Concussion or other brain injury (Go to INJ_Q08)
09 Poisoning (excluding food poisoning, poison ivy, other contact dermatitis, and allergies) (Go to INJ_Q08)
10 Injury to internal organs (Go to INJ_Q07)
11 Other - Specify (Go to INJ_S05)
DK, RF

Go to INJ_Q06
INJ_S05  INTERVIEWER: Specify.

(80 spaces)
DK, RF

INJ_Q06  What part of the body was injured?

INJ_06

01 Multiple sites
02 Eyes (excluding fracture of facial bones around the eye)
03 Head (including facial bones)
04 Neck
05 Shoulder, upper arm
06 Elbow, lower arm
07 Wrist
08 Hand
09 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, RF

Go to INJ_Q08

INJ_Q07  What part of the body was injured?

INJ_07

1 Chest (within rib cage)
2 Abdomen or pelvis (below ribs)
3 Other - Specify (Go to INJ_S07)
DK, RF

Go to INJ_Q08

INJ_S07  INTERVIEWER: Specify.

(80 spaces)
DK, RF
INJ_Q08 Where ^WERE ^YOU1 when ^YOU1 ^WERE injured?
For example, someone's house, an office building, construction site.

INJ_08 INTERVIEWER: If respondent says 'At work', probe for type of workplace.

01 In a home or its surrounding area (including respondent’s home or other homes)
02 Residential institution
03 School, college, university (exclude sports areas)
04 Sports or athletics area of school, college, university
05 Other sports or athletics area (exclude school sports areas)
06 Other institution (e.g., church, hospital, theatre, civic building)
07 Street, highway, sidewalk
08 Commercial area (e.g., store, restaurant, office building, transport terminal)
09 Industrial or construction area
10 Farm (exclude farmhouse and its surrounding area)
11 Countryside, forest, lake, ocean, mountains, prairie, etc.
12 Other - Specify (Go to INJ_S08)

DK, RF

Go to INJ_Q09

INJ_S08 INTERVIEWER: Specify.

(80 spaces)

DK, RF

INJ_Q09 What ^WERE ^YOU1 doing when ^YOU1 ^WERE injured?

INJ_09 01 Sports or physical exercise (including school activities, and running)
02 Leisure or hobby (including volunteering)
03 Working at a job or business (excluding travel to and from work)
04 Household chores, outdoor yard maintenance, home renovations or other unpaid work
05 Sleeping, eating, personal care
06 Going up and down stairs
07 Driver or passenger in/on road motor vehicle (including motorcycles, trucks)
08 Driver or passenger in/on off-road motor vehicle (including boat, ATV, snowmobile)
09 Walking
10 Other - Specify (Go to INJ_S09)

DK, RF

Go to INJ_C09
INJ_S09 INTERVIEWER: Specify.

(80 spaces)
DK, RF

INJ_C09 If INJ_Q09 = 3, and (14 < age < 75), go to INJ_B09.
Otherwise, go to INJ_C10.

INJ_B09 Call "Workplace Injuries" Sub Block (INW)

INJ_C10 If INJ_Q05 = 9 (poisoning), go to INJ_Q13.
Otherwise, go to INJ_Q10.

INJ_Q10 Was the injury the result of a fall?

INJ_10 INTERVIEWER: Exclude transportation accidents and any falls that involve another person (e.g. collision, contact in sports, fight)

1 Yes (Go to INJ_Q12)
2 No (Go to INJ_Q12)

INJ_Q11A How did ^YOU1 fall?

INJ_11A

1 While skating, skiing or snowboarding
2 While engaged in other sport or physical exercise (including school activities and running)
3 Going up or down stairs / steps (icy or not)
4 Slip, trip, stumble or loss balance while walking on ice or snow
5 Slip, trip or stumble or loss balance while walking on any other surface
6 From furniture or while rising from furniture (e.g., bed, chair)
7 From elevated position (e.g., ladder, tree, scaffolding)
8 Due to health problems (e.g., faint, weakness, dizziness, hip/knee gave out, seizure)
9 Other - Specify (Go to INJ_S11A)

DK, RF

Go to INJ_Q12A
INJ_S11A  INTERVIEWER: Specify.

(80 spaces)
DK, RF
Go to INJ_Q12A

INJ_Q12  What caused the injury?

INJ_12
01 Transportation accident
02 Accidentally bumped, pushed, bitten, etc. by person or animal
03 Accidentally struck or crushed by object(s)
04 Accidental contact with sharp object, tool or machine
05 Smoke, fire, flames
06 Accidental contact with hot object, liquid or gas
07 Extreme weather or natural disaster
08 Overexertion or strenuous movement
09 Physical assault
10 Other - Specify  (Go to INJ_S12) DK, RF

Go to INJ_Q12A

INJ_S12  INTERVIEWER: Specify.

(80 spaces)
DK, RF

INJ_Q12A  At what time of day did ^YOUR1 injury occur?

INJ_12A
1 Morning (06:00-11:59)
2 Afternoon (12:00-17:59)
3 Evening (18:00-23:59)
4 Night (00:00-05:59) DK, RF

INJ_Q13  Did ^YOU2 receive any medical attention for the injury from a health professional in the 48 hours following the injury?

INJ_13
1 Yes
2 No  (Go to INJ_Q15A) DK, RF  (Go to INJ_Q15A)
INJ_Q14  Where did YOU1 receive treatment in the 48 hours?

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_14L  4  Other clinic (e.g. walk-in, appointment, sports)
INJ_14M  5  Physiotherapist or massage therapist’s office
INJ_14F  6  Community health centre / CLSC
INJ_14N  7  Chiropractor’s office
INJ_14O  8  Where the injury happened/on-site (workplace, school, sports field, hotel, ski hill)
INJ_14K  9  Other
DK, RF

INJ_Q15  WERE_C YOU1 admitted to a hospital overnight?

INJ_15  

1  Yes
2  No
DK, RF

INJ_E15  Inconsistent answers have been entered. Please confirm.

Note:  Trigger soft edit if INJ_Q15 = 1 and CHP_Q01 = 2 (No)

INJ_Q15A  At the present time, ARE YOU1 getting follow-up care from a health professional because of this injury?

INJ_15A  

1  Yes
2  No
DK, RF

INJ_Q16  In the past 12 months, did YOU2 have any other injuries 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, RF  (Go to INJ_END)

INJ_Q17  How many injuries?

INJ_17  

___ Injuries
(MIN: 1) (MAX: 30; warning after 6)
DK, RF

INJ_END
This next section deals with repetitive strain injuries. By this we mean injuries to muscles, tendons or nerves caused by overuse or repeating the same movement over an extended period. For example, carpal tunnel syndrome, tennis elbow or tendonitis.

INTERVIEWER: Press <Enter> to continue.

REP_Q1
In the past 12 months, did YOU have any injuries due to repetitive strain?

REP_1A
1 Yes
2 No (Go to INJ_D1A)
DK, RF (Go to INJ_D1A)

REP_Q2
Were these injuries serious enough to limit YOUR normal activities?

REP_2
1 Yes
2 No (Go to INJ_D1A)
DK, RF (Go to INJ_D1A)

REP_Q3
Thinking about the most serious repetitive strain, what part of the body was affected?

REP_3
01 Head
02 Neck
03 Shoulder, upper arm
04 Elbow, lower arm
05 Wrist
06 Hand
07 Hip
08 Thigh
09 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, RF

REP_D3A (not applicable)
^DOVERB_C^YOU1 know what type of activity caused this repetitive strain injury?

REP_Q3A

REP_3A

1  Yes
2  No  (Go to INJ_D1A)
    DK, RF (Go to INJ_D1A)

REP_Q4

Was the activity something you did while working at a job or business (excluding travel to or from work)?

REP_4

1  Yes
2  No
DK, RF

REP_Q5

What type of activity was this?

INTERVIEWER: Mark all that apply.

REP_5A

1  Walking
REP_5B

2  Sports or physical exercise (including school activities and running)
REP_5C

3  Leisure or hobby (include volunteering)
REP_5D

4  Household chores, outdoor yard maintenance, home renovations or other unpaid work
REP_5F

5  Computer use or typing
REP_5G

6  Driving a motor vehicle
REP_5H

7  Lifting or carrying an object or person
REP_5I

8  Other - Specify  (Go to REP_S5)
    DK, RF

Go to INJ_DIA

REP_S5

INTERVIEWER: Specify.

(80 spaces)
DK, RF

REP_END
Workplace Injury - Sub Block (INW)

INW_BEG  Theme content

INW_Q01  Did this injury occur in your current main job?
INW_1
1  Yes  (Go to INW_END)
2  No  (Go to INW_END)

INW_Q02  What kind of business, industry or service were you working in when you were injured? (For example: cardboard box manufacturing, road maintenance, retail shoe store, secondary school, dairy farm, municipal government).

(50 spaces)
DK, RF

INW_Q03  What kind of work WERE YOU doing? (For example: babysitting in own home, factory worker, forestry technician)
INW_3

(50 spaces)
DK, RF

Note:  Use trigram search, source file is PrepSOC.tdf

INW_D03  SIC_CODE (4 bytes)
Note:  Store SOC Code associated with INW_Q03

INW_C03  If INW_D03 = 1 or INW_D03 = 2 (OtherSpec), go to INW_S03. Otherwise, go to INW_Q04.

INW_S03  INTERVIEWER: Specify.

(50 spaces)
DK, RF
What were your most important activities or duties? (For example: caring for children, stamp press machine operator, forest examiner.)

(50 spaces)
DK, RF
Satisfaction with life (SWL)

SWL_BEG Optional Content (See Appendix 2)

SWL_C1 If (do SWL block = 2), go to SWL_END. 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?

SWL_02

1. Very satisfied
2. Satisfied
3. Neither satisfied nor dissatisfied
4. Dissatisfied
5. Very dissatisfied
DK, RF (Go to SWL_END)

SWL_Q03 How satisfied are you with your leisure activities?

SWL_03

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

SWL_Q04 (How satisfied are you) with your financial situation?

SWL_04

1. Very satisfied
2. Satisfied
3. Neither satisfied nor dissatisfied
4. Dissatisfied
5. Very dissatisfied
DK, RF
How satisfied are you with yourself?

1. Very satisfied
2. Satisfied
3. Neither satisfied nor dissatisfied
4. Dissatisfied
5. Very dissatisfied

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

How satisfied are you with your relationships with 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
<table>
<thead>
<tr>
<th>SWL_Q10</th>
<th>(How satisfied are you) with your neighbourhood?</th>
</tr>
</thead>
<tbody>
<tr>
<td>SWL_10</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Very satisfied</td>
</tr>
<tr>
<td>2</td>
<td>Satisfied</td>
</tr>
<tr>
<td>3</td>
<td>Neither satisfied nor dissatisfied</td>
</tr>
<tr>
<td>4</td>
<td>Dissatisfied</td>
</tr>
<tr>
<td>5</td>
<td>Very dissatisfied</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

SWL_END
Stress - Sources (STS)

**STS_BEG**
Optional Content (See Appendix 2)

**STS_C1**
If (do STS block = 1), go to STS_C2.
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, RF (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, RF
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.

01 Time pressures / not enough time
02 Own physical health problem or condition
03 Own emotional or mental health problem or condition
04 Financial situation (e.g., not enough money, debt)
05 Own work situation (e.g., hours of work, working conditions)
06 School
07 Employment status (e.g., unemployment)
08 Caring for - own children
09 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 (Go to STS_S3)
16 Nothing
   DK, RF

Go to STS_END

INTERVIEWER: Specify.

(80 spaces)
   DK, RF

STEPS_END
Stress - Coping with stress (STC)

STC_BEG  Optional Content (See Appendix 2)

STC_C1  If (do STC block = 1), go to STC_C2. Otherwise, go to STC_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, RF  (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, RF

STC_Q1_3  (When dealing with stress,) how often do you avoid being with people?

1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF
How often do you sleep more than usual to deal with stress?

Often
Sometimes
Rarely
Never
DK, RF

When dealing with stress, how often do you try to feel better by eating more, or less, than usual?

Often
Sometimes
Rarely
Never

When dealing with stress, how often do you try to feel better by smoking more cigarettes than usual?

Often
Sometimes
Rarely
Never
Do not smoke
DK, RF

When dealing with stress, how often do you try to feel better by drinking alcohol?

Often
Sometimes
Rarely
Never
DK, RF

(When dealing with stress,) how often do you try to feel better by using drugs or medication?

Often
Sometimes
Rarely
Never
DK, RF
STC_Q1_6  How often do you jog or do other exercise to deal with stress?
STC_66
1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF

STC_Q1_7  How often do you pray or seek spiritual help to deal with stress?
STC_67
1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF

STC_Q1_8  (To deal with stress,) how often do you try to relax by doing something enjoyable?
STC_68
1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF

STC_Q1_9  (To deal with stress,) how often do you try to look on the bright side of things?
STC_69
1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF

STC_Q1_10 How often do you blame yourself?
STC_610
1  Often
2  Sometimes
3  Rarely
4  Never
   DK, RF
To deal with stress, how often do you wish the situation would go away or somehow be finished?

1. Often
2. Sometimes
3. Rarely
4. Never

DK, RF
Self-esteem (SFE)

SFE_BEG  Optional Content (See Appendix 2)

SFE_C500A  If (do SFE block = 1), go to SFE_C500B. 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
RF  (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, RF

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, RF
<table>
<thead>
<tr>
<th>SFE_Q504</th>
<th>You take a positive attitude toward yourself.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFE_504</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Strongly agree</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
</tr>
<tr>
<td>3</td>
<td>Neither agree nor disagree</td>
</tr>
<tr>
<td>4</td>
<td>Disagree</td>
</tr>
<tr>
<td>5</td>
<td>Strongly disagree</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SFE_Q505</th>
<th>On the whole you are satisfied with yourself.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFE_505</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Strongly agree</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
</tr>
<tr>
<td>3</td>
<td>Neither agree nor disagree</td>
</tr>
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<td>4</td>
<td>Disagree</td>
</tr>
<tr>
<td>5</td>
<td>Strongly disagree</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SFE_Q506</th>
<th>All in all, you're inclined to feel you're a failure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFE_506</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Strongly agree</td>
</tr>
<tr>
<td>2</td>
<td>Agree</td>
</tr>
<tr>
<td>3</td>
<td>Neither agree nor disagree</td>
</tr>
<tr>
<td>4</td>
<td>Disagree</td>
</tr>
<tr>
<td>5</td>
<td>Strongly disagree</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>
Mastery (MAS)

MAS_BEG Optional Content (See Appendix 2)

MAS_C600A If (do MAS block = 1), go to MAS_C600B. 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
RF (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, RF
There is little you can do to change many of the important things in your life.

You often feel helpless in dealing with problems of life.

Sometimes you feel that you are being pushed around in life.

What happens to you in the future mostly depends on you.

You can do just about anything you really set your mind to.
Smoking (SMK)

SMK_BEG  Core content

SMK_C1  If (do SMK block = 2), go to SMK_END.
        Otherwise, go to SMK_R1.

SMK_R1  The next questions are about smoking.

        INTERVIEWER: Press <Enter> to continue.

SMK_Q201A  In ^YOUR1 lifetime, ^HAVE ^YOU2 smoked a total of 100 or more cigarettes (about 4 packs)?

1  Yes  (Go to SMK_Q201C)
2  No
      DK, RF

SMK_Q201B  ^HAVE_C ^YOU1 ever smoked a whole cigarette?

1  Yes  (Go to SMK_Q201C)
2  No  (Go to SMK_Q202)
      DK  (Go to SMK_Q202)
      RF

SMK_C201C  If SMK_Q201A = RF and SMK_Q201B = RF, go to SMK_END.
           Otherwise, go to SMK_Q202.

SMK_Q201C  At what age did ^YOU1 smoke ^YOUR1 first whole cigarette?

        INTERVIEWER: Minimum is 5; maximum is ^CURRAGE.

        Age in years
        (MIN: 5) (MAX: ^CURRAGE)
        DK, RF  (Go to SMK_Q202)

SMK_E201C  The entered age at which the respondent first smoked a whole cigarette is invalid. Please return and correct.

Note:  Trigger hard edit if SMK_Q201C < 5 or SMK_Q201C > current age.
SMK_Q202  At the present time, ^DOVERB ^YOU2 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, RF  (Go to SMK_END)

Note:  Daily smoker (current)

SMK_Q203  At what age did ^YOU1 begin to smoke cigarettes daily?

SMK_203

INTERVIEWER:  Minimum is 5; maximum is [current age].

|   | Age in years  
|___|________________________|
|   | (MIN: 5) (MAX: current age)  
|   | DK, RF  (Go to SMK_Q204)

SMK_E203  The entered age at which the respondent first began to smoke cigarettes daily is invalid. Please return and correct.

Note:  Trigger hard edit if SMK_Q203 < 5 or SMK_Q203 > current age.

SMK_E203B  The respondent has indicated that they began smoking cigarettes daily at a younger age than when they smoked their first whole cigarette. Please confirm.

Note:  Trigger soft edit if SMK_Q201C > SMK_Q203.

SMK_Q204  How many cigarettes ^DOVERB ^YOU1 smoke each day now?

SMK_204

|   | Cigarettes  
|___|________________________|
|   | (MIN: 1) (MAX: 99; warning after 60)  
|   | DK, RF  (Go to SMK_END)

Note:  Occasional smoker (current)

SMK_Q205B  On the days that ^YOU2 ^DOVERB smoke, how many cigarettes ^DOVERB ^YOU1 usually smoke?

SMK_05B

|   | Cigarettes  
|___|________________________|
|   | (MIN: 1) (MAX: 99; warning after 60)  
|   | DK, RF

SMK_Q205C  In the past month, on how many days ^HAVE ^YOU1 smoked 1 or more cigarettes?

SMK_05C

|   | Days  
|___|________________________|
|   | (MIN: 0) (MAX: 30)  
|   | DK, RF
SMK_E205C  The respondent has previously indicated that they smoke cigarettes occasionally, but that they have smoked every day for the past month. Please verify.

Note: Trigger soft edit if SMK_Q202 = 2 and SMK_Q205C = 30.

SMK_C205D  If SMK_Q201A <> 1 (has not smoked 100 or more cigarettes lifetime), go to SMK_END. Otherwise, go to SMK_Q205D.

Note: Occasional smoker or non-smoker (current)

SMK_Q205D ^HAVE_C ^YOU1 ever smoked cigarettes daily?

SMK_05D

1  Yes  (Go to SMK_Q207)
2  No
   DK, RF  (Go to SMK_END)

SMK_C206A  If SMK_Q202 = 2 (current occasional smoker), go to SMK_END. Otherwise, go to SMK_Q206A.

Note: Non-smoker (current)

SMK_Q206A When did ^YOU1 stop smoking? Was it:

SMK_06A INTERVIEWER: Read categories to respondent.

1  ... less than one year ago?  (Go to SMK_END)
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, RF  (Go to SMK_END)
**In what month did ^YOU1 stop?**

<table>
<thead>
<tr>
<th>Month</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>01</td>
</tr>
<tr>
<td>February</td>
<td>02</td>
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<tr>
<td>March</td>
<td>03</td>
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<td>April</td>
<td>04</td>
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<td>May</td>
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<td>June</td>
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<td>September</td>
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<td>October</td>
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<td>November</td>
<td>11</td>
</tr>
<tr>
<td>December</td>
<td>12</td>
</tr>
</tbody>
</table>

Go to SMK_END

**How many years ago was it?**

**INTERVIEWER:** Minimum is 3; maximum is [current age - 5].

<table>
<thead>
<tr>
<th>Years</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>

(MIN: 3) (MAX: current age-5)

DK, RF (Go to SMK_END)

Go to SMK_END

**The number of years ago in which the respondent stopped smoking is invalid. Please return and correct.**

**Note:** Trigger hard edit if SMK_Q206C < 3 or SMK_Q206C > current age-5.

**Occasional smoker or non-smoker (current) - Daily smoker (previously)**

**At what age did ^YOU1 begin to smoke (cigarettes) daily?**

**INTERVIEWER:** Minimum is 5; maximum is [current age].

<table>
<thead>
<tr>
<th>Age in years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

(MIN: 5) (MAX: current age)

DK, RF (Go to SMK_Q208)

**The entered age at which the respondent first began to smoke cigarettes daily is invalid. Please return and correct**

**Note:** Trigger hard edit if SMK_Q207 < 5 or SMK_Q207 > current age.
**SMK_Q208**  
How many cigarettes did ^YOU1 usually smoke each day?

**SMK_208**  
| | | Cigarettes  
(MIN: 1) (MAX: 99; warning after 60)  
DK, RF

**SMK_Q209A**  
When did ^YOU1 stop smoking daily? 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_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, RF (Go to SMK_END)

**SMK_Q209B**  
In what month did ^YOU1 stop?

01 January  
02 February  
03 March  
04 April  
05 May  
06 June  
07 July  
08 August  
09 September  
10 October  
11 November  
12 December  
DK, RF

Go to SMK_C210

**SMK_Q209C**  
How many years ago was it?

**INTERVIEWER:** Minimum is 3; maximum is [current age-5].

| | | | Years  
(MIN: 3) (MAX: current age-5)  
DK, RF (Go to SMK_C210)

**SMK_E209C**  
The number of years ago that the respondent stopped smoking daily is invalid. Please return and correct.

**Note:** Trigger hard edit if SMK_Q209C < 3 or SMK_Q209C > current age-5.
The number of years ago that the respondent stopped smoking daily is invalid. Please return and correct.

Note: Trigger hard edit if SMK_Q207 > (current age - SMK_Q209C).

If SMK_Q202 = 2 (current occasional smoker), go to SMK_END. Otherwise, go to SMK_Q210.

Note: Non-smoker (current)

Was that when ^YOU1 completely quit smoking?

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

When did ^YOU1 stop smoking completely? Was it:

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)
   DK, RF (Go to SMK_END)

In what month did ^YOU1 stop?

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
DK, RF

Go to SMK_END
**SMK_Q210C**  How many years ago was it?

**SMK_10C**  INTERVIEWER: Minimum is 3; maximum is [current age-5].

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>

Years
(MIN: 3) (MAX: current age-5)
DK, RF  (Go to SMK_END)

**SMK_E210C**  The number of years ago that the respondent completely stopped smoking is invalid. Please return and correct.

**Note:**  Trigger hard edit if SMK_Q210C < 3 or SMK_Q210C > current age-5.

**SMK_END**
Smoking - Stages of change (SCH)

SCH_BEG  Optional Content (See Appendix 2)

SCH_C1  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_Q1  Are you seriously considering quitting smoking within the next 6 months?
        SCH_1
              1  Yes
              2  No    (Go to SCH_Q3)
                      DK, RF    (Go to SCH_Q3)

SCH_Q2  Are you seriously considering quitting within the next 30 days?
        SCH_2
              1  Yes
              2  No
                      DK, RF

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, RF    (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, RF

SCH_END
Smoking cessation methods (SCA)

SCA_BEG  Optional Content (See Appendix 2)

SCA_C1  If (do SCA block = 1), go to SCA_C10A. Otherwise, go to SCA_END.

SCA_C10A  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) |
|   |   | (Go to SCA_Q11) | DK, RF | (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, RF | (Go to SCA_Q12) |

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) |
|   |   | (Go to SCA_Q12) | DK, RF | (Go to SCA_Q12) |
SCA_Q11A  How useful was that in helping you quit?

SCA_11A

1  Very useful
2  Somewhat useful
3  Not very useful
4  Not useful at all
    DK, RF

SCA_Q12  In the past 12 months, did you try medication such as Zyban, Prolev or Wellbutrin to quit smoking?

SCA_12

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

SCA_Q12A  How useful was that in helping you quit?

SCA_12A

1  Very useful
2  Somewhat useful
3  Not very useful
4  Not useful at all
    DK, RF

    Go to SCA_END

SCA_C50  If SMK_Q202 = 3, go to SCA_END.
Otherwise, go to SCA_C50A.

SCA_C50A  If (do SCH block = 2), go to SCA_Q50.
Otherwise, go to SCA_C50B.

SCA_C50B  If S~H_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?

SCA_50

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

Note:  In processing, if a respondent answered SCH_Q3 = 1, 2, the variable SCA_Q50 is given the value of SCH_Q3.
In the past 12 months, did you try any of the following to quit smoking:

...a nicotine patch?

1  Yes
2  No
   DK, RF

(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, RF

(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, RF

SCA_END
Smoking - Physician counselling (SPC)

SPC_BEG  Optional Content (See Appendix 2)

SPC_C1  If (do SPC block = 1), go to SPC_C2. 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?

SPC_10

1 Yes
2 No (Go to SPC_C20A)
DK, RF (Go to SPC_C20A)

SPC_D11  If SMK_Q202 = 1 or 2, ^DT_SMOKING = "smoke".
If SMK_Q206A = 1 or SMK_Q209A = 1, ^DT_SMOKING = "smoked".

SPC_Q11  Does your doctor know that you ^DT_SMOKING cigarettes?

SPC_11

1 Yes
2 No (Go to SPC_C20A)
DK, RF (Go to SPC_C20A)

SPC_Q12  In the past 12 months, did your doctor advise you to quit smoking?

SPC_12

1 Yes
2 No
DK, RF (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  (Go to SPC_C20A)
2 No  (Go to SPC_C20A)
DK, RF  (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, RF

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.
Otherwise, go to SPC_C20B.

SPC_C20B  If (do DEN block = 1) and (DEN_Q130 = 2, DK or RF) (did not visit dentist in past 12 months), go to SPC_END.
Otherwise, go to SPC_C20C.

SPC_C20C  If (do CHP block = 1) and (CHP_Q14 = 1) (saw or talked to dentist in past 12 months), go to SPC_Q20.
Otherwise, go to SPC_END.

SPC_Q20  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  (Go to SPC_END)
2 No  (Go to SPC_END)
DK, RF  (Go to SPC_END)
SPC_Q21  Does your dentist or dental hygienist know that you ^DT_SMOKING cigarettes?

SPC_21

1. Yes

2. No (Go to SPC_END)

DK, RF (Go to SPC_END)

SPC_Q22  In the past 12 months, did the dentist or hygienist advise you to quit smoking?

SPC_22

1. Yes

2. No

DK, RF
Exposure to second-hand smoke (ETS)

ETS_BEG Core content

ETS_C1 If (do ETS block = 2), go to ETS_END. 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_Q35. 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_C10)
   DK, RF (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.

|   |   |   |   |   | Number of people
|---|---|---|---|---| (MIN: 1) (MAX: 15)
|   |   |   |   |   | DK, RF

ETS_C20 If SMK_Q202 = 1 or 2 (current daily or occasional smoker), go to ETS_C35. Otherwise, go to ETS_Q20.

ETS_Q20 In the past month, were you exposed to second-hand smoke, every day or almost every day, in a car or other private vehicle?

1 Yes
2 No
   DK, RF
ETS_Q20B  (In the past month,) ^WERE ^YOU1 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, RF

ETS_C35  If ETS_Q10 = 1 (at least one person smokes inside the home), go to ETS_Q35. Otherwise, go to ETS_Q36.

ETS_Q35  Is smoking allowed inside your home?

ETS_35

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

ETS_Q36  Is smoking inside your home restricted in any way?

ETS_36

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

ETS_Q37  How is smoking restricted inside your home?

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

ETS_37A  1  Allowed in certain rooms only
ETS_37B  2  Restricted in the presence of young children
ETS_37C  3  Allowed only if windows are open or with another type of ventilation
ETS_37D  4  Other restriction(s)
DK, RF

ETS_END
Smoking - Other tobacco products (TAL)

TAL_BEG  Optional Content (See Appendix 2)

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 ^YOUR1 use of tobacco other than cigarettes.

TAL_1  In the past month, ^HAVE ^YOU1 smoked cigars?

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

TAL_Q2  (In the past month,) ^HAVE ^YOU1 smoked a pipe?

TAL_2

1  Yes
2  No
   DK, RF

TAL_Q3  (In the past month,) ^HAVE ^YOU1 used snuff?

TAL_3

1  Yes
2  No
   DK, RF

TAL_Q4  (In the past month,) ^HAVE ^YOU1 used chewing tobacco?

TAL_4

1  Yes
2  No
   DK, RF

TAL_END
Alcohol use (ALC)

ALC_BEG Core content

ALC_C1A If (do ALC block = 1), go to ALC_R1. Otherwise, go to ALC_END.

ALC_D1 (not applicable)

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?

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<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No  (Go to ALC_END)</td>
</tr>
<tr>
<td></td>
<td>DK, RF (Go to ALC_END)</td>
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</table>

ALC_Q2 During the past 12 months, how often did ^YOU1 drink alcoholic beverages?

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<tbody>
<tr>
<td>1</td>
<td>Less than once a month</td>
</tr>
<tr>
<td>2</td>
<td>Once a month</td>
</tr>
<tr>
<td>3</td>
<td>2 to 3 times a month</td>
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<tr>
<td>4</td>
<td>Once a week</td>
</tr>
<tr>
<td>5</td>
<td>2 to 3 times a week</td>
</tr>
<tr>
<td>6</td>
<td>4 to 6 times a week</td>
</tr>
<tr>
<td>7</td>
<td>Every day</td>
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<td>DK, RF</td>
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</table>

ALC_Q3 How often in the past 12 months ^HAVE ^YOU1 had 5 or more drinks on one occasion?

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<tbody>
<tr>
<td>1</td>
<td>Never</td>
</tr>
<tr>
<td>2</td>
<td>Less than once a month</td>
</tr>
<tr>
<td>3</td>
<td>Once a month</td>
</tr>
<tr>
<td>4</td>
<td>2 to 3 times a month</td>
</tr>
<tr>
<td>5</td>
<td>Once a week</td>
</tr>
<tr>
<td>6</td>
<td>More than once a week</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>
Alcohol use during the past week (ALW)

ALW_BEG Optional Content (See Appendix 2)

ALW_C1 If (do ALW block = 1), go to ALW_C2. Otherwise, go to ALW_END.

ALW_C2 If ALC_Q1 = No, DK or RF, 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 ^YOU2 have a drink of beer, wine, liquor or any other alcoholic beverage?

ALW_1

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

ALW_D5 Yesterday = WEEKDAY(TODAY - 1)
ALW_D5A
If Yesterday = 1, DayE[1] = “Sunday”.
If Yesterday = 1, DayE[2] = “Saturday”.
If Yesterday = 1, DayE[3] = “Friday”.
If Yesterday = 1, DayE[4] = “Thursday”.
If Yesterday = 1, DayE[5] = “Wednesday”.
If Yesterday = 1, DayE[6] = “Tuesday”.
If Yesterday = 1, DayE[7] = “Monday”.
If Yesterday = 2, DayE[1] = “Monday”.
If Yesterday = 2, DayE[2] = “Sunday”.
If Yesterday = 2, DayE[3] = “Saturday”.
If Yesterday = 2, DayE[4] = “Friday”.
If Yesterday = 2, DayE[6] = “Wednesday”.
If Yesterday = 2, DayE[7] = “Tuesday”.
If Yesterday = 3, DayE[1] = “Tuesday”.
If Yesterday = 3, DayE[4] = “Saturday”.
If Yesterday = 3, DayE[5] = “Friday”.
If Yesterday = 3, DayE[7] = “Wednesday”.
If Yesterday = 4, DayE[1] = “Wednesday”.
If Yesterday = 4, DayE[2] = “Tuesday”.
If Yesterday = 4, DayE[5] = “Saturday”.
If Yesterday = 4, DayE[6] = “Friday”.
If Yesterday = 5, DayE[1] = “Thursday”.
If Yesterday = 5, DayE[2] = “Wednesday”.
If Yesterday = 5, DayE[3] = “Tuesday”.
If Yesterday = 5, DayE[5] = “Sunday”.
If Yesterday = 5, DayE[6] = “Saturday”.
If Yesterday = 5, DayE[7] = “Friday”.
If Yesterday = 6, DayE[1] = “Friday”.
If Yesterday = 6, DayE[2] = “Thursday”.
If Yesterday = 6, DayE[3] = “Wednesday”.
If Yesterday = 6, DayE[4] = “Tuesday”.
If Yesterday = 6, DayE[5] = “Monday”.
If Yesterday = 6, DayE[6] = “Sunday”.
If Yesterday = 6, DayE[7] = “Saturday”.
If Yesterday = 7, DayE[1] = “Saturday”.
If Yesterday = 7, DayE[2] = “Friday”.
If Yesterday = 7, DayE[4] = “Wednesday”.
If Yesterday = 7, DayE[5] = “Tuesday”.
If Yesterday = 7, DayE[7] = “Sunday”.
ALW_Q5A1 Starting with yesterday, that is ^DayE[1], how many drinks did ^YOU2 have?

ALW_2A1 |___| Number of drinks
(MIN: 0) (MAX: 99)
DK, RF

ALW_C5A1 If response to Question ALW_Q5A1 is RF, go to ALW_END. Otherwise, go to ALW_Q5A2.

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].

Note: 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]?

ALW_2A2 |___| Number of drinks
(MIN: 0) (MAX: 99)
DK, RF

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].

Note: 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.

ALW_Q5A3 (How many drinks did ^YOU1 have:)
...on ^DayE[3]?

ALW_2A3 |___| Number of drinks
(MIN: 0) (MAX: 99)
DK, RF
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].

Note:  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]?

ALW_2A4  Number of drinks
         (MIN: 0) (MAX: 99)
         DK, RF

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].

Note:  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]?

ALW_2A5  Number of drinks
         (MIN: 0) (MAX: 99)
         DK, RF

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].

Note:  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]?

ALW_2A6  Number of drinks
(MIN: 0) (MAX: 99)
DK, RF

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].

Note: 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:) ...on ^DayE[7]?

ALW_2A7  Number of drinks
(MIN: 0) (MAX: 99)
DK, RF

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].

Note: 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.

Note: Trigger hard edit if ALW_Q5A1 to ALW_Q5A7 all = 0.

ALW_END
Driving and safety (DRV)

DRV_BEG  Optional Content (See Appendix 2)

DRV_C01A  If (do DRV block = 2), go to DRV_END.
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.

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<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
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<td></td>
<td>DK, RF  (Go to DRV_END)</td>
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</table>

DRV_Q01B  In the past 12 months, have you driven a motorcycle?

*DRV_01B  1  Yes
2  No

DK, RF  (Go to DRVEND)

DRV_C02  If DRV_Q01A = 2 and DRV_Q01B = 2 or DK or RF, 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?

INTERVIEWER: Read categories to respondent.

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

DRV_Q03A  Excluding hands-free use, how often do you use a cell phone while you are driving a motor vehicle?

INTERVIEWER: Read categories to respondent.
   If respondent does not use a cell phone, select «Never».

1 Often
2 Sometimes
3 Rarely
4 Never
   DK, RF

DRV_Q03B  How often do you use a hands-free when talking on the cell phone while you are driving a motor vehicle?

INTERVIEWER: Read categories to respondent.
   If respondent does not use a hands-free, select «Never».

1 Often
2 Sometimes
3 Rarely
4 Never
   DK, RF

DRV_Q04  How often do you drive when you are feeling tired?

1 Often
2 Sometimes
3 Rarely
4 Never
   DK, RF
### DRV_Q05
**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?**

DK, RF

### DRV_Q06
**(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?**

DK, RF

### DRV_C07
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.

### DRV_Q07
**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)
   - DK, RF (Go to DRV_R2)

### DRV_Q07A
**How many times (in the past 12 months)?**

| _____ | Times  
|-------|--------
| (MIN: 1) (MAX: 95; warning after 20) |  
| DK, RF |  

### DRV_R2
**Now some questions about being a passenger in a motor vehicle.**

**INTERVIEWER:** Press <Enter> to continue.
**DRV_Q08A**

When you are a front seat passenger, how often do you fasten your seat belt?

**INTERVIEWER:** Read categories to respondent.

1. Always
2. Most of the time
3. Rarely
4. Never
5. Do not ride in front seat
   
   DK, RF

**DRV_Q08B**

When you are a back seat passenger, how often do you fasten your seat belt?

1. Always
2. Most of the time
3. Rarely
4. Never
5. Do not ride in back seat
   
   DK, RF

**DRV_Q09**

When you are a passenger in a taxi, how often do you fasten your seat belt?

1. Always
2. Most of the time
3. Rarely
4. Never
5. Do not take taxis
   
   DK, RF

**DRV_Q10**

In the past 12 months, have you been a passenger with a driver who had 2 or more drinks in the hour before driving?

1. Yes
2. No  (Go to DRV_Q11A)
   
   DK, RF  (Go to DRV_Q11A)

**DRV_Q10A**

How many times (in the past 12 months)?

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Times

(MIN: 1) (MAX: 95; warning after 20)

DK, RF
Canadian Community Health Survey (CCHS)  
Annual Component - 2010 Questionnaire

DRV_Q11A

In the past 12 months, have you been the driver of, or a passenger in, a snowmobile, motor boat or seadoo?

1. Yes
2. No
   (Go to DRV_END)

DRV_Q11B

In the past 12 months, have you been the driver of, or a passenger in, an ATV (all terrain vehicle)?

1. Yes
2. No
   (Go to DRV_C13)
   (Go to DRV_END)

DRV_Q11A

In the past 12 months, have you been the driver of, or a passenger in, a snowmobile, motor boat or seadoo?

1. Yes
2. No
   (Go to DRV_END)

DRV_Q11B

In the past 12 months, have you been the driver of, or a passenger in, an ATV (all terrain vehicle)?

1. Yes
2. No
   (Go to DRV_C13)
   (Go to DRV_END)

DRV_Q12

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
   DK, RF

DRV_C13

If DRV_Q11A = 2 (not driven/passenger - snowmobile, motor boat or seadoo) and DRV_Q11B = 2 (not driven/passenger - ATV), go to DRV_END. Otherwise, go to DRV_D13.

DRV_D13

If DRV_Q11A = 1 and DRV_Q11B = 1, ^DT_ATV = "a snowmobile, motor boat, seadoo or ATV".
If DRV_Q11A = 1 and DRV_Q11B = 2, ^DT_ATV = "a snowmobile, motor boat or seadoo".
If DRV_Q11A = 2 and DRV_Q11B = 1, ^DT_ATV = "an ATV".

DRV_Q13

In the past 12 months, have you been a passenger on ^DT_ATV with a driver who had 2 or more drinks in the hour before driving?

1. Yes
2. No
   (Go to DRV_C14)
   (Go to DRV_C14)

DRV_Q13A

How many times (in the past 12 months)?

Times
(MIN: 1) (MAX: 95; warning after 20)
DK, RF
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 after having 2 or more drinks in the hour before you drove?

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

How many times (in the past 12 months)?

| | | Times
(MIN: 1) (MAX: 95; warning after 20)
DK, RF

Go to DRV_END
Alcohol use - Dependence (ALD)

ALD_BEG  Optional Content (See Appendix 2)

ALD_C01A  If (do ALD block = 2) or proxy interview, go to ALD_END.
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  (Go to ALD_Q03)
2  No  (Go to ALD_END)

DK, RF

ALD_Q02  How many times? Was it:

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, RF

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, RF
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, RF

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, RF

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, RF

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, RF (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, RF

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, RF
**People who cut down their alcohol use or stop drinking altogether may not feel well if they have been drinking steadily for some time. These feelings are more intense and can last longer than the usual hangover.**

INTERVIEWER: Press <Enter> to continue.

### 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?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### 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?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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?**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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. Otherwise, go to 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.

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               
10  Very severe interference

Number
(MIN: 0) (MAX: 10)
DK, RF
<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>Interference increasing</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

**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>1-9</td>
<td>Interference increasing</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

**INTERVIEWER**: If necessary, enter "11" to indicate "Not applicable".
(In the past 12 months,) how much did your alcohol use 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>1-9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

How much did it 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>

DK, RF
Maternal experiences - Breastfeeding (MEX)

MEX_BEG  Core content

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. Have you given birth in the past 5 years?

INTERVIEWER: Do not include stillbirths.

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

MEX_D01A  DV_YEARAGO = ^CURRENTYEAR - 5

MEX_Q01A  In what year?

INTERVIEWER: Enter year of birth of last baby. Minimum is [DV_YEARAGO]; maximum is [^CURRENTYEAR].

| | | | | | | | Year
(MIN: DV_YEARAGO) (MAX: ^CURRENTYEAR)
DK, RF

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, RF

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
DK, RF (Go to MEX.END)
What is the main reason that you did not breastfeed?

01 Bottle feeding easier
02 Formula as good as breast milk
03 Breastfeeding is unappealing / disgusting
04 Father / partner didn’t want me to
05 Returned to work / school early
06 C-Section
07 Medical condition - mother
08 Medical condition - baby
09 Premature birth
10 Multiple births (e.g. twins)
11 Wanted to drink alcohol
12 Wanted to smoke
13 Other - Specify (Go to MEX_S04)
          DK, RF

(80 spaces)

Are you still breastfeeding?

1 Yes (Go to MEX_Q07)
2 No (Go to MEX_END)

How long did you breastfeed (your last baby)?

01 Less than 1 week
02 1 to 2 weeks
03 3 to 4 weeks
04 5 to 8 weeks
05 9 weeks to less than 12 weeks
06 3 months (12 weeks to less than 16 weeks)
07 4 months (16 weeks to less than 20 weeks)
08 5 months (20 weeks to less than 24 weeks)
09 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, RF (Go to MEX_END)
MEX_Q07

If exact age not known, obtain best estimate.

01 Less than 1 week
02 1 to 2 weeks
03 3 to 4 weeks
04 5 to 8 weeks
05 9 weeks to less than 12 weeks
06 3 months (12 weeks to less than 16 weeks)
07 4 months (16 weeks to less than 20 weeks)
08 5 months (20 weeks to less than 24 weeks)
09 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_Q08)
   DK, RF (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. Please confirm.

INTERVIEWER: If answers are valid, ask for the reason explaining the gap and enter it as
   a remark.

Note: Trigger soft edit if MEX_07 < 13 and ORD(MEX_Q07) - ORD(MEX_Q06) > 1

In other words, if MEX_Q07 < 13 and category number in MEX_Q07 minus category
number in MEX_Q06 is greater than 1.

MEX_Q08

What is the main reason that you first added other liquids or solid foods?

01 Not enough breast milk
02 Baby was ready for solid foods
03 Inconvenience / fatigue due to breastfeeding
04 Difficulty with BF techniques (e.g., sore nipples, engorged breasts, mastitis)
05 Medical condition - mother
06 Medical condition - baby
07 Advice of doctor / health professional
08 Returned to work / school
09 Advice of partner / family / friends
10 Formula equally healthy for baby
11 Wanted to drink alcohol
12 Wanted to smoke
13 Other - Specify (Go to MEX_S08)
   DK, RF

Go to MEX_C09
MEX_S08  INTERVIEWER: Specify.

(80 spaces)
DK, RF

MEX_C09  If MEX_Q07 = 1 (baby less than 1 week), go to MEX_C10. Otherwise, go to MEX_Q09.

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, RF

MEX_C10  If MEX_Q05 = 1 (still breastfeeding), go to MEX_END. Otherwise, go to MEX_Q10.

MEX_Q10  What is the main reason that you stopped breastfeeding?

01  Not enough breast milk
02  Baby was ready for solid foods
03  Inconvenience / fatigue due to breastfeeding
04  Difficulty with BF techniques (e.g., sore nipples, engorged breasts, mastitis)
05  Medical condition - mother
06  Medical condition - baby
07  Planned to stop at this time
08  Child weaned him / herself (e.g., baby biting, refusing breast)
09  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 (Go to MEX_S10)
DK, RF

Go to MEX_END

MEX_S10  INTERVIEWER: Specify.

(80 spaces)
DK, RF
MEX_END
Maternal experiences - Alcohol use during pregnancy (MXA)

MXA_BEG  Optional Content (See Appendix 2)

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 RF, go to MXA_END. Otherwise, go to MXA_C30.

MXA_C30  If (ALN_Q5B = 2, or RF ( never drank), go to MXA_END. Otherwise, go to MXA_C30.

MXA_Q30  Did you drink any alcohol during your last pregnancy?

MXA_01

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Go to MXA_C32)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DK, RF</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Go to MXA_END)</td>
</tr>
</tbody>
</table>

MXA_Q31  How often did you drink?

MXA_02

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Less than once a month</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>Once a month</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>2 to 3 times a month</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Once a week</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>2 to 3 times a week</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>4 to 6 times a week</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Every day</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>No</td>
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<tr>
<td></td>
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<td>(Go to MXA_END)</td>
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<td>DK, RF</td>
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<tr>
<td></td>
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<td>(Go to MXA_END)</td>
</tr>
<tr>
<td>Code</td>
<td>Frequency</td>
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<tr>
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<td></td>
</tr>
<tr>
<td>1</td>
<td>Less than once a month</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Once a month</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>2 to 3 times a month</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Once a week</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>2 to 3 times a week</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>4 to 6 times a week</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Every day</td>
<td></td>
</tr>
</tbody>
</table>

DK, RF
Maternal experiences - Smoking during pregnancy (MXS)

MXS_BEG Optional Content (See Appendix 2)

MXS_C01A If (do MXS block = 1), go to MXS_C01B. Otherwise, go to MXS_END.

MXS_C01B If proxy interview or sex = male or age < 15 or > 55 or MEX_Q01 = 2, DK or RF, go to MXS_END. Otherwise, go to MXS_C20.

MXS_C20 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?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Daily</td>
<td>(Go to MXS_Q22)</td>
</tr>
<tr>
<td>2</td>
<td>Occasionally</td>
<td>(Go to MXS_C23)</td>
</tr>
<tr>
<td>3</td>
<td>Not at all</td>
<td>(Go to MXS_C23)</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td>(Go to MXS_Q26)</td>
</tr>
</tbody>
</table>

Note: Daily Smokers only

MXS_Q21 How many cigarettes did you usually smoke each day?

<table>
<thead>
<tr>
<th></th>
<th>Number of cigarettes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(MIN: 1) (MAX: 99, warning after 60)</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Note: Occasional Smokers only

MXS_Q22 On the days that you smoked, how many cigarettes did you usually smoke?

<table>
<thead>
<tr>
<th></th>
<th>Number of cigarettes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(MIN: 1) (MAX: 99, warning after 60)</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

MXS_C23 If MEX_Q03 = 1 (breastfed last baby), go to MXS_Q23. Otherwise, go to MXS_Q26.
When you were breastfeeding (your last baby), did you smoke daily, occasionally or not at all?

1. Daily
2. Occasionally (Go to MXS_Q25)
3. Not at all (Go to MXS_Q26)

Note: Daily smokers only

How many cigarettes did you usually smoke each day?

Number of cigarettes
(MIN: 1) (MAX: 99 warning after 60)
DK, RF
Go to MXS_Q26

Note: Occasional smokers only

On the days that you smoked, how many cigarettes did you usually smoke?

Number of cigarettes
(MIN: 1) (MAX: 99 warning after 60)
DK, RF

Did anyone regularly smoke in your presence during or after the pregnancy (about 6 months after)?

1. Yes
2. No
DK, RF
Illicit drugs use  (IDG)

DRG_BEG  Optional Content (See Appendix 2)

DRG_C1  If (do DRG block = 1), go to DRG_C2.
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?

INTERVIEWER: Read categories to respondent.

1  Yes, just once
2  Yes, more than once
3  No  (Go to DRG_Q04)
   DK, RF  (Go to DRG_END)

DRG_Q02  Have you used it in the past 12 months?

1  Yes
2  No  (Go to DRG_Q04)
   DK, RF  (Go to DRG_Q04)

DRG_C03  If DRG_Q01 = 1, go to DRG_Q04.
Otherwise, go to DRG_Q03.

DRG_Q03  How often (did you use marijuana, cannabis or hashish 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, RF

Page 194 of 378
Have you ever used or tried cocaine or crack?
1. Yes, just once
2. Yes, more than once
3. No (Go to DRG_Q07)
   DK, RF (Go to DRG_Q07)

Have you used it in the past 12 months?
1. Yes
2. No (Go to DRG_Q07)
   DK, RF (Go to DRG_Q07)

If DRG_Q04 = 1, go to DRG_Q07. Otherwise, go to DRG_Q06.

How often (did you use cocaine or crack in the past 12 months)?
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, RF

Have you ever used or tried speed (amphetamines)?
1. Yes, just once
2. Yes, more than once
3. No (Go to DRG_Q10)
   DK, RF (Go to DRG_Q10)

Have you used it in the past 12 months?
1. Yes
2. No (Go to DRG_Q10)
   DK, RF (Go to DRG_Q10)

If DRG_Q07 = 1, go to DRG_Q10. Otherwise, go to DRG_Q09.
DRG_Q09  How often (did you use speed (amphetamines) 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, RF

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, RF  (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, RF  (Go to DRG_Q13)

DRG_C12  If DRG_Q10 = 1, go to DRG_Q13. Otherwise, go to DRG_Q12.

DRG_Q12  How often (did you use ecstasy or other similar drugs 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, RF

DRG_Q13  Have you ever used or tried hallucinogens, PCP or LSD (acid)?

IDG_13

1  Yes, just once
2  Yes, more than once
3  No  (Go to DRG_Q16)
   DK, RF  (Go to DRG_Q16)
**DRG_Q14**  Have you used it in the past 12 months?

<table>
<thead>
<tr>
<th>IDG_14</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No</td>
</tr>
<tr>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**DRG_C15**  If DRG_Q13 = 1, go to DRG_Q16. Otherwise, go to DRG_Q15.

**DRG_Q15**  How often (did you use hallucinogens, PCP or LSD in the past 12 months)?

<table>
<thead>
<tr>
<th>IDG_15</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTERVIEWER: Read categories to respondent.</td>
</tr>
<tr>
<td>1 Less than once a month</td>
</tr>
<tr>
<td>2 1 to 3 times a month</td>
</tr>
<tr>
<td>3 Once a week</td>
</tr>
<tr>
<td>4 More than once a week</td>
</tr>
<tr>
<td>5 Every day</td>
</tr>
<tr>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**DRG_Q16**  Did you ever sniff glue, gasoline or other solvents?

<table>
<thead>
<tr>
<th>IDG_16</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Yes, just once</td>
</tr>
<tr>
<td>2 Yes, more than once</td>
</tr>
<tr>
<td>3 No</td>
</tr>
<tr>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**DRG_Q17**  Did you sniff some in the past 12 months?

<table>
<thead>
<tr>
<th>IDG_17</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Yes</td>
</tr>
<tr>
<td>2 No</td>
</tr>
<tr>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**DRG_C18**  If DRG_Q16 = 1, go to DRG_Q19. Otherwise, go to DRG_Q18.
DRG_Q18

**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, RF

DRG_Q19

**Have you ever used or tried heroin?**

1. Yes, just once
2. Yes, more than once
3. No (Go to DRG_Q22)

DK, RF (Go to DRG_Q22)

DRG_Q20

**Have you used it in the past 12 months?**

1. Yes
2. No (Go to DRG_Q22)

DK, RF (Go to DRG_Q22)

DRG_C21

If DRG_Q19 = 1, go to DRG_Q22. Otherwise, go to DRG_Q21.

DRG_Q21

**How often (did you use heroin 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, RF

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?**

1. Yes, just once
2. Yes, more than once
3. No (Go to DRG_C25A_1)

DK, RF (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, RF (Go to DRG_C25A1)

**DRG_C24** If DRG_Q22 = 1, go to DRG_C25A1.
Otherwise, go to DRG_Q24.

**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, RF

Note: DRG_C25A1 = Count of instances where DRG_Q01, DRG_Q04, DRG_Q07, DRG_Q10, DRG_Q13, DRG_Q16 and DRG_Q19 = 3, DK or RF.

**DRG_C25A_1** If DRG_C25A1 = 7, go to DRG_END.
Otherwise, go to DRG_C25A_2.

Note: DRG_C25A2 = Count of instances where DRG_Q03, DRG_Q06, DRG_Q09, DRG_Q12, DRG_Q15, DRG_Q18 and DRG_Q21 >= 2.

**DRG_C25A_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?

**IDG_25A**

1. Yes
2. No
DK, RF
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.

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, RF

(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, RF

(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, RF

(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, RF

(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, RF
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, RF

DRG_Q25H  (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, RF

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  How much did your use of drugs interfere with:

...your home responsibilities, like cleaning, shopping and taking care of the house or apartment?

   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, RF
DRG_Q26B_1 (How much did your use interfere with:)
IDG_6B1

...your ability to attend school?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td>No interference</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
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<td>4</td>
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<td>7</td>
<td></td>
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</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>V</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

INTERVIEWER: If necessary, enter "11" to indicate "Not applicable".

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>(MIN: 0) (MAX: 11)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DK, RF

DRG_Q26B_2 (How much did your use interfere with:)
IDG_6B2

...your ability to work at a regular job?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td>No interference</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>3</td>
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<td>4</td>
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<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>V</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

INTERVIEWER: If necessary, enter "11" to indicate "Not applicable".

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>(MIN: 0) (MAX: 11)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DK, RF
(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".

<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>I</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

How much did your use of drugs 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>I</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

DK, RF
Problem gambling (CPG)

CPG_BEG  Optional Content (See Appendix 2)

CPG_C01  If (do CPG block = 2), go to CPG_END.
If (Proxy interview), 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
hand 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, RF

CPG_C01A  If CPG_Q01A = RF, go to CPG_END.
Otherwise, go to CPG_Q01B.
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, RF |

Note: CPG_C01B = Count instances where CPG_Q01B to CPG_Q01M = 7, 8, DK or RF.

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, RF |

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, RF |
### CPG_Q01E
*(In the past 12 months,)* how often have you bet or spent money on video lottery terminals (VLTs) outside of casinos?

<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, RF</td>
</tr>
</tbody>
</table>

### CPG_Q01F
*(In the past 12 months,)* how often have you bet or spent money on coin slots or VLTs at a casino?

<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, RF</td>
</tr>
</tbody>
</table>

### 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)?

<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, RF</td>
</tr>
</tbody>
</table>
(In the past 12 months,) how often have you bet or spent money on Internet or arcade gambling?

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, RF

In the past 12 months, how often have you bet or spent money on live horse racing at the track or off track?

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, RF

(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?

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, RF
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

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

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

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, RF**

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, RF** (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, RF**

(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, RF**
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPG_Q05</td>
<td>In the past 12 months, how often have you borrowed money or sold anything to get money to gamble?</td>
<td>1. Never 2. Sometimes 3. Most of the time 4. Almost always DK, RF</td>
</tr>
<tr>
<td>CPG_Q06</td>
<td>(In the past 12 months,) how often have you felt that you might have a problem with gambling?</td>
<td>1. Never 2. Sometimes 3. Most of the time 4. Almost always DK, RF</td>
</tr>
<tr>
<td>CPG_Q07</td>
<td>(In the past 12 months,) how often has gambling caused you any health problems, including stress or anxiety?</td>
<td>1. Never 2. Sometimes 3. Most of the time 4. Almost always DK, RF</td>
</tr>
<tr>
<td>CPG_Q08</td>
<td>(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?</td>
<td>1. Never 2. Sometimes 3. Most of the time 4. Almost always DK, RF</td>
</tr>
<tr>
<td>CPG_Q09</td>
<td>(In the past 12 months,) how often has your gambling caused financial problems for you or your family?</td>
<td>1. Never 2. Sometimes 3. Most of the time 4. Almost always DK, RF</td>
</tr>
</tbody>
</table>
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, RF

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, RF

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, RF

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, RF

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, RF
CPG_Q15  (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, RF

CPG_Q16  (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, RF

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_C17  If CPG_C17J <= 2, go to CPG_END.
   Otherwise, go to CPG_Q17.

CPG_Q17  Has anyone in your family ever had a gambling problem?

1  Yes
2  No
   DK, RF

CPG_Q18  In the past 12 months, have you used alcohol or drugs while gambling?

1  Yes
2  No
   DK, RF

CPG_R19  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.
**CPG_Q19A**

**CPG_19A**

*During the past 12 months, how much did your gambling activities interfere with your home responsibilities, like cleaning, shopping and taking care of the house or apartment?*

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No interference</td>
</tr>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
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<td>5</td>
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<td>6</td>
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<tr>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>V</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

**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</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
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<td>4</td>
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<td>7</td>
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<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>V</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

**CPG_Q19B_1**

**CPG_9B1**

*How much did these activities interfere with your ability to attend school?*

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No interference</td>
</tr>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
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<td>4</td>
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<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>V</td>
</tr>
<tr>
<td>10</td>
<td>Very severe interference</td>
</tr>
</tbody>
</table>

**INTERVIEWER:** If necessary, enter "11" to indicate "Not applicable".
How much did they interfere with 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

(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".)

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
How much did they interfere with your social life?

0  No interference
1  
2  
3  
4  
5  
6  
7  
8  
9  V
10 Very severe interference

 DK, RF

 Number
(MIN: 0) (MAX: 10)
Sexual behaviours (SXB)

SXB_BEG  Theme content

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?

SXB_1

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

SXB_Q02  How old were you the first time?

SXB_2

INTERVIEWER:  Maximum is [current age].

<table>
<thead>
<tr>
<th></th>
<th>Age in years</th>
</tr>
</thead>
<tbody>
<tr>
<td>MIN: 1</td>
<td>(MAX: Warning, value is below 12 or above current age)</td>
</tr>
<tr>
<td>DK, RF</td>
<td>(Go to SXB_END)</td>
</tr>
</tbody>
</table>

SXB_E02  The entered age at which the respondent first had sexual intercourse is invalid. Please return and correct.

Note:  Trigger hard edit if SXB_Q02 < 1 or SXB_Q02 > [current age].

SXB_Q03  In the past 12 months, have you had sexual intercourse?

SXB_3

1  Yes  (Go to SXB_Q07)
2  No   (Go to SXB_Q07)
DK, RF  (Go to SXB_END)
SXB_Q04 With how many different partners?
SXB_4
1 1 partner
2 2 partners
3 3 partners
4 4 or more partners
DK
RF (Go to SXB_END)

SXB_Q07 Have you ever been diagnosed with a sexually transmitted infection?
SXB_07
1 Yes
2 No
DK, RF

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, RF

SXB_C09B If age > 24 or if respondent's sex = spouse's sex, 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.
If HWT_Q1 = 1 (currently pregnant), go to SXB_Q11. Otherwise, go to 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.

It is important to me to avoid getting pregnant right now.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree
   DK
   RF (Go to SXB_END)

If sex = male, go to SXB_R10. Otherwise, go to SXB_Q11.

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.

It is important to me to avoid getting my partner pregnant right now.

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
   RF (Go to SXB_END)

In the past 12 months, did you and your partner usually use birth control?

1. Yes (Go to SXB_Q12)
2. No (Go to SXB_END)
   DK, RF (Go to SXB_END)
What kind of birth control did you and your partner usually use?

**INTERVIEWER**: Mark all that apply.

| SXB_12A   | 1   | Condom (male or female condom) |
| SXB_12B   | 2   | Birth control pill             |
| SXB_12C   | 3   | Diaphragm                      |
| SXB_12D   | 4   | Spermicide (e.g., foam, jelly, film) |
| SXB_12F   | 5   | Birth control injection (Deprovera) |
| SXB_12E   | 6   | Other - Specify (Go to SXB_S12) |

Go to SXB_C13

**SXB_S12**

**INTERVIEWER**: Specify.

(80 spaces)

DK, RF

**SXB_C13**

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.

| SXB_13A   | 1   | Condom (male or female condom) |
| SXB_13B   | 2   | Birth control pill             |
| SXB_13C   | 3   | Diaphragm                      |
| SXB_13D   | 4   | Spermicide (e.g., foam, jelly, film) |
| SXB_13F   | 5   | Birth control injection (Deprovera) |
| SXB_13G   | 6   | Nothing                        |
| SXB_13E   | 7   | Other - Specify (Go to SXB_S13) |

Go to SXB_S13

**SXB_S13**

**INTERVIEWER**: Specify.

(80 spaces)

DK, RF

**SXB_END**
Psychological well-being (PWB)
PWB_BEG Optional Content (See Appendix 2)

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
DK, RF

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
DK, RF
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>PWB_Q03</td>
<td>(During the past month,) you were a &quot;go-getter&quot;, you took on lots of projects.</td>
<td>Almost always (1), Frequently (2), Half the time (3), Rarely (4), Never (5), DK, RF</td>
</tr>
<tr>
<td>PWB_Q04</td>
<td>(During the past month,) you felt emotionally balanced.</td>
<td>Almost always (1), Frequently (2), Half the time (3), Rarely (4), Never (5), DK, RF</td>
</tr>
<tr>
<td>PWB_Q05</td>
<td>(During the past month,) you felt loved and appreciated.</td>
<td>Almost always (1), Frequently (2), Half the time (3), Rarely (4), Never (5), DK, RF</td>
</tr>
<tr>
<td>PWB_Q06</td>
<td>(During the past month,) you had goals and ambitions.</td>
<td>Almost always (1), Frequently (2), Half the time (3), Rarely (4), Never (5), DK, RF</td>
</tr>
</tbody>
</table>
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, RF

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, RF

PWB_Q09 (During the past month,) you smiled easily.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never
   DK, RF

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, RF

PWB_Q11 (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
   DK, RF
PWB_Q12  
(During the past month,) you were curious and interested in all sorts of things.  
PWB_12  
1  Almost always  
2  Frequently  
3  Half the time  
4  Rarely  
5  Never  
DK, RF  

PWB_Q13  
(During the past month,) you were able to clearly sort things out when faced with complicated situations.  
PWB_13  
1  Almost always  
2  Frequently  
3  Half the time  
4  Rarely  
5  Never  
DK, RF  

PWB_Q14  
(During the past month,) you found life exciting and you wanted to enjoy every moment of it.  
PWB_14  
1  Almost always  
2  Frequently  
3  Half the time  
4  Rarely  
5  Never  
DK, RF  

PWB_Q15  
(During the past month,) your life was well-balanced between your family, personal and professional activities.  
PWB_15  
1  Almost always  
2  Frequently  
3  Half the time  
4  Rarely  
5  Never  
DK, RF
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Scale</th>
</tr>
</thead>
</table>
| PWB_Q16    | During the past month, you were quite calm and level-headed.                | 1. Almost always  
2. Frequently  
3. Half the time  
4. Rarely  
5. Never  
DK, RF |
| 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, RF |
| 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, RF |
| 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, RF |
| 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, RF |
(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, RF

(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, RF

(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, RF

(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, RF

(During the past month,) your morale was good.

1. Almost always
2. Frequently
3. Half the time
4. Rarely
5. Never
   DK, RF

PWB_END
Social support - Availability (SSA)

SSA_BEG  Optional Content (See Appendix 2)

SSA_C1  If (do SSA block = 1), go to SSA_C2. 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?

___ Close friends
(MIN: 0) (MAX: 99 ; warning after 20)
DK, RF  (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:

... someone to help you if you were confined to bed?

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, RF  (Go to SSA_END)

Note:  If SSA_Q02 = 2, 3, 4 or 5 then ^DT_KEYPHRASES21A = "to help you if you were confined to bed".
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSA_Q03</td>
<td>Someone you can count on to listen to you when you need to talk?</td>
<td>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, RF)</td>
</tr>
<tr>
<td>SSA_Q04</td>
<td>Someone to give you advice about a crisis?</td>
<td>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, RF)</td>
</tr>
<tr>
<td>SSA_Q05</td>
<td>Someone to take you to the doctor if you needed it?</td>
<td>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, RF)</td>
</tr>
<tr>
<td>SSA_Q06</td>
<td>Someone who shows you love and affection?</td>
<td>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, RF)</td>
</tr>
</tbody>
</table>
SSA_Q07  SSA_07

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, RF

Note: If SSA_Q07 = 2, 3, 4 or 5 then ^DT_KEYPHRASES23A = "to have a good time with".

SSA_Q08  SSA_08

(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
DK, RF

Note: If SSA_Q08 = 2, 3, 4 or 5 then ^DT_KEYPHRASES24A = "to give you information".

SSA_Q09  SSA_09

(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
DK, RF

Note: If SSA_Q09 = 2, 3, 4 or 5 then ^DT_KEYPHRASES24A = "to confide in".

SSA_Q10  SSA_10

(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
DK, RF

Note: If SSA_Q10 = 2, 3, 4 or 5 then ^DT_KEYPHRASES22A = "to hug you".
SSA_Q11 (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

DK, RF

Note:  If SSA_Q11 = 2, 3, 4 or 5 then DT_KEYPHRASES23A = "to relax with".

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

DK, RF

Note:  If SSA_Q12 = 2, 3, 4 or 5 then DT_KEYPHRASES21A = "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

DK, RF

Note:  If SSA_Q13 = 2, 3, 4 or 5 then DT_KEYPHRASES24A = "to advise you".

SSA_Q14 (Again, 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

DK, RF

Note:  If SSA_Q14 = 2, 3, 4 or 5 then DT_KEYPHRASES23A = "to do things with".
SSA_Q15  (How often is each of the following kinds of support available to you if you need it:)

SSA_15

... 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
DK, RF

Note: If SSA_Q15 = 2, 3, 4 or 5 then ^DT_KEYPHRASES21A = "to help with daily chores".

SSA_Q16  (How often is each of the following kinds of support available to you if you need it:)

SSA_16

... 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, RF

Note: If SSA_Q16 = 2, 3, 4 or 5 then ^DT_KEYPHRASES24A = "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:)

SSA_17

... 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, RF

Note: If SSA_Q17 = 2, 3, 4 or 5 then ^DT_KEYPHRASES24A = "to turn to for suggestions".

SSA_Q18  (How often is each of the following kinds of support available to you if you need it:)

SSA_18

... 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, RF

Note: If SSA_Q18 = 2, 3, 4 or 5 then ^DT_KEYPHRASES23A = "to do something enjoyable with".
SSA_Q19  (How often is each of the following kinds of support available to you if you need it:)

SSA_19  ... 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, RF

Note:  If SSA_Q19 = 2, 3, 4 or 5 then ^DT_KEYPHRASES24A = "to understand your problems".

SSA_Q20  (How often is each of the following kinds of support available to you if you need it:)

SSA_20  ... someone to love you and make you feel wanted?

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, RF

Note:  If SSA_Q20 = 2, 3, 4 or 5 then ^DT KEYPHRASES22A = "to love you and make you feel wanted".
Social support - Utilization (SSU)

SSU_BEG Optional Content (See Appendix 2)

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, go to SSU_D21A. Otherwise, go to SSU_C22.

SSU_D21A If SSA_Q02 = 2, 3, 4, 5, ^DT_KEYPHRASES21A = “to help you if you were confined to bed”. If SSA_Q05 = 2, 3, 4, 5, ^DT_KEYPHRASES21A = “to take you to the doctor”. If SSA_Q12 = 2, 3, 4, 5, ^DT_KEYPHRASES21A = “to prepare your meals”. If SSA_Q15 = 2, 3, 4, 5, ^DT_KEYPHRASES21A = “to help with daily chores”.

Note: ^DT_KEYPHRASES 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_Q02 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_Q21A In the past 12 months, did you receive the following support: ...someone ^DT_KEYPHRASES21A?

   1 Yes
   2 No  (Go to SSU_C22)
   DK, RF  (Go to SSU_C22)
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, RF

SSU_C22 If any responses of 2, 3, 4 or 5 in SSA_Q06 or SSA_Q10 or SSA_Q20, go to SSU_D22A. Otherwise, go to SSU_C23.

SSU_D22A If SSA_Q06 = 2, 3, 4, 5, ^DT_KEYPHRASES22A = "to show you affection".
If SSA_Q10 = 2, 3, 4, 5, ^DT_KEYPHRASES22A = "to hug you".
If SSA_Q20 = 2, 3, 4, 5, ^DT_KEYPHRASES22A = "to love you and make you feel wanted".

Note: (^DT_KEYPHRASES 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_Q22A (In the past 12 months, did you receive the following support:)

...someone ^DT_KEYPHRASES22A?

1 Yes
2 No (Go to SSU_C23)
DK, RF (Go to SSU_C23)

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, RF
SSU_C23  If any responses of 2, 3, 4 or 5 in SSA_Q07 or SSA_Q11 or SSA_Q14 or SSA_Q18, go to SSU_D23A. Otherwise, go to SSU_C24.

SSU_D23A  If SSA_Q07 = 2, 3, 4, 5, ^DT_KEYPHRASES23A = "to have a good time with".
If SSA_Q11 = 2, 3, 4, 5, ^DT_KEYPHRASES23A = "to relax with".
If SSA_Q14 = 2, 3, 4, 5, ^DT_KEYPHRASES23A = "to do things with".
If SSA_Q18 = 2, 3, 4, 5, ^DT_KEYPHRASES23A = "to do something enjoyable with".

Note: (DT_KEYPHRASES 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_Q23A  (In the past 12 months, did you receive the following support:)
...someone ^DT_KEYPHRASES23A?

1  Yes  (Go to SSU_C24)
2  No  (Go to SSU_C24)

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, RF  (Go to SSU_C24)

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, go to SSU_D24A. Otherwise, go to SSU_END.
SSU_D24A
If SSA_Q03 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to listen to you".
If SSA_Q04 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to give you advice".
If SSA_Q08 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to give you information".
If SSA_Q09 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to confide in".
If SSA_Q13 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to advise you".
If SSA_Q16 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to share your worries and fears with".
If SSA_Q17 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to turn to for suggestions".
If SSA_Q19 = 2, 3, 4, 5, "^DT_KEYPHRASES24A = "to understand your problems".

Note: (^DT_KEYPHRASES 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 in SSA_Q04;
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_Q24A
(In the past 12 months, did you receive the following support:)
...someone ^DT_KEYPHRASES24A?

SSU_24A

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

SSU_Q24B
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, RF

SSU_END
Consultations about mental health (CMH)

CMH_BEG Optional Content (See Appendix 2)

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, RF (Go to CMH_END)

CMH_Q01L How many times (in the past 12 months)?

   | | | | Times
   (MIN: 1) (MAX: 366; warning after 25)
   DK, RF

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                       |

Go to CMH_END
CMH_S01M INTERVIEWER: Specify.

____________________________________________________
(80 spaces)
DK, RF

CMH_E01M[1] 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.

Note: Trigger soft edit if CMH_Q01M = 1 (saw a family medical doctor) and CHP_Q03 = 2.

CMH_E01M[2] 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.

Note: Trigger soft edit if CMH_Q01M = 2 (saw a psychiatrist) and CHP_Q08 = 2.

CMH_E01M[3] 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.

Note: Trigger soft edit if CMH_Q01M = 3 (saw a psychologist) and CHP_Q20 = 2.

CMH_E01M[4] 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.

Note: Trigger soft edit if CMH_Q01M = 4 (saw a nurse) and CHP_Q11 = 2.

CMH_E01M[5] 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.

Note: Trigger soft edit if CMH_Q01M = 5 (saw a social worker or counsellor) and CHP_Q22 = 2.

CMH_END
Distress (DIS)

DIS_BEG  Optional Content (See Appendix 2)

DIS_C1  If (do DIS block = 1), go to DIS_C2. 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, RF  (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  (Go to DIS_Q01D)
     DK, RF  (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

**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

**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)

**Note:** DK, RF (Go to DIS_Q01G)
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, RF

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_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, RF

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).

DIS_Q01H  
(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, RF
(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

(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

If DIS_Q01B to DIS_Q01J are DK or RF, go to DIS_END. Otherwise, go to DIS_Q01K.

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
3. About the same
4. Never have had any

If DIS_Q01B to DIS_Q01J are DK or RF, go to DIS_END. Otherwise, go to DIS_Q01K.

Is that a lot more, somewhat more or only a little more often than usual?
1. A lot
2. Somewhat
3. A little

Go to DIS_Q01N
DIS_Q01M  Is that a lot less, somewhat less or only a little less often than usual?
DIS_10M
1   A lot
2   Somewhat
3   A little
    DK, RF

DIS_Q01N  During the past month, how much did these feelings usually interfere with your life or activities?
DIS_10N
INTERVIEWER: Read categories to respondent.
1   A lot
2   Some
3   A little
4   Not at all
    DK, RF

DIS_END
Depression (DEP)

DEP_BEG  Optional Content (See Appendix 2)

DEP_C01  If (do DEP block = 1), go to DEP_C02.
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?

DPS_02
1  Yes  (Go to DEP_Q16)
2  No   (Go to DEP_Q16)
    DK, RF  (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:

DPS_03
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, RF  (Go to DEP_END)

DEP_Q04  How often did you feel this way during those 2 weeks?

DPS_04
INTERVIEWER: Read categories to respondent.

1  Every day
2  Almost every day
3  Less often  (Go to DEP_Q16)
    DK, RF  (Go to DEP_END)

DEP_Q05  During those 2 weeks did you lose interest in most things?

DPS_05
1  Yes
2  No   (Go to DEP_END)
    DK, RF  (Go to DEP_END)
DEP_D05  If DEP_Q05 = 1 (Yes), ^DT_KEYPHRASEQ05 = "Losing interest". Otherwise, ^DT_KEYPHRASEQ05 = "null".

DEP_Q06  Did you feel tired out or low on energy all of the time?

DPS_06

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

DEP_D06  If DEP_Q06 = 1 (Yes), ^DT_KEYPHRASEQ06 = "Feeling tired". Otherwise, ^DT_KEYPHRASEQ06 = "null".

DEP_Q07  Did you gain weight, lose weight or stay about the same?

DPS_07

1  Gained weight
2  Lost weight
3  Stayed about the same  (Go to DEP_Q09)
4  Was on a diet       (Go to DEP_Q09)
   DK, RF       (Go to DEP_END)

DEP_D07A  If DEP_Q07 = 1, ^DT_KEYPHRASEQ07 = "Gaining weight". If DEP_Q07 = 2, ^DT_KEYPHRASEQ07 = "Losing weight". Otherwise, ^DT_KEYPHRASEQ07 = "null".

DEP_D07B  If DEP_Q07 = 1, ^DT_GAINLOST = "gain". Otherwise, ^DT_GAINLOST = "lose".

DEP_Q08A  About how much did you ^DT_GAINLOST?

DPS_08A

INTERVIEWER: Enter amount only.

|   |   | Weight (MIN: 1) (MAX: 99)
|   |   | DK, RF  (Go to DEP_Q09)

DEP_N08A  INTERVIEWER: Was that in pounds or in kilograms?

DPS_08B

1  Pounds
2  Kilograms

(DK, RF are not allowed)

DEP_E08A  An unusual value has been entered. Please confirm.

Note:  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?

DPS_09

1 Yes
2 No (Go to DEP_Q11)
DK, RF (Go to DEP_END)

DEP_D09 If DEP_Q09 = 1 (Yes), ^DT_KEYPHRASEQ09 = "Trouble falling asleep". Otherwise, ^DT_KEYPHRASEQ09 = "null".

DEP_Q10 How often did that happen?

DPS_10

INTERVIEWER: Read categories to respondent.

1 Every night
2 Nearly every night
3 Less often
DK, RF (Go to DEP_END)

DEP_D10 If DEP_Q10 = 1 (Yes), ^DT_KEYPHRASEQ10 = "Trouble concentrating". Otherwise, ^DT_KEYPHRASEQ10 = "null".

DEP_Q11 Did you have a lot more trouble concentrating than usual?

DPS_11

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

DEP_D11 If DEP_Q11 = 1 (Yes), ^DT_KEYPHRASEQ11 = "Trouble concentrating". Otherwise, ^DT_KEYPHRASEQ11 = "null".

DEP_Q12 At these times, people sometimes feel down on themselves, no good or worthless. Did you feel this way?

DPS_12

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

DEP_D12 If DEP_Q12 = 1 (Yes), ^DT_KEYPHRASEQ12 = "Feeling down on yourself". Otherwise, ^DT_KEYPHRASEQ12 = "null".

DEP_Q13 Did you think a lot about death - either your own, someone else's or death in general?

DPS_13

1 Yes
2 No
DK, RF (Go to DEP_END)
DEP_D13
If DEP_Q13 = 1 (Yes), ^DT_KEYPHRASEQ13 = "Thoughts about death". Otherwise, ^DT_KEYPHRASEQ13 = "null".

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 (^DT_KEYPHRASEQ05, ^DT_KEYPHRASEQ06, ^DT_KEYPHRASEQ07, ^DT_KEYPHRASEQ09, ^DT_KEYPHRASEQ11, ^DT_KEYPHRASEQ12, ^DT_KEYPHRASEQ13).

INTERVIEWER: Press <Enter> to continue.

DEP_Q14
About how many weeks altogether did you feel this way during the past 12 months?

DPS_14
|___| Weeks
(MIN: 2) (MAX: 53)
DK, RF (Go to DEP_END)

DEP_C15
If DEP_Q14 > 51 weeks, go to DEP_END. Otherwise, go to DEP_Q15.

DEP_Q15
Think about the last time you felt this way for 2 weeks or more in a row. In what month was that?

DPS_15
01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
DK, RF

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, RF (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, RF (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, RF (Go to DEP_END)

**DEP_Q19**

During those 2 weeks did you feel tired out or low on energy all the time?

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

**DEP_D19**

If DEP_Q19 = 1 (Yes), ^DT_KEYPHRASEQ19 = "Feeling tired". Otherwise, ^DT_KEYPHRASEQ19 = "null".

**DEP_Q20**

Did you gain weight, lose weight, or stay about the same?

1. Gained weight
2. Lost weight
3. Stayed about the same (Go to DEP_Q22)
4. Was on a diet (Go to DEP_Q22)
   DK, RF (Go to DEP_END)
DEP_D20A  If DEP_Q20 = 1, ^DT_KEYPHRASEQ20 = "Gaining weight".
If DEP_Q20 = 2, ^DT_KEYPHRASEQ20 = "Losing weight".
Otherwise, ^DT_KEYPHRASEQ20 = "null".

DEP_D20B  If DEP_Q20 = 1, ^DT_WEIGHT = "gain".
Otherwise, ^DT_WEIGHT = "lose".

DEP_Q21A  About how much did you ^DT_WEIGHT?

DPS_21A  INTERVIEWER: Enter amount only.

       Weight
       (MIN: 1) (MAX: 99)
       DK, RF   (Go to DEP_Q22)

DEP_N21A  INTERVIEWER: Was that in pounds or in kilograms?

DPS_21B  1   Pounds
         2   Kilograms

         (DK, RF are not allowed)

DEP_E21A  An unusual value has been entered. Please confirm.

Note:  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?

DPS_22  1   Yes
         2   No    (Go to DEP_Q24)
         DK, RF  (Go to DEP_END)

DEP_D22  If DEP_Q22 = 1 (Yes), ^DT_KEYPHRASEQ22 = "Trouble falling asleep".
         Otherwise, ^DT_KEYPHRASEQ22 = "null".

DEP_Q23  How often did that happen?

DPS_23  INTERVIEWER: Read categories to respondent.

       1   Every night
       2   Nearly every night
       3   Less often

         DK, RF   (Go to DEP_END)
DEP_Q24
Did you have a lot more trouble concentrating than usual?

DPS_24
1  Yes
2  No
  DK, RF  (Go to DEP_END)

DEP_D24
If DEP_Q24 = 1 (Yes), ^DT_KEYPHRASEQ24 = "Trouble concentrating".
Otherwise, ^DT_KEYPHRASEQ24 = "null".

DEP_Q25
At these times, people sometimes feel down on themselves, no good, or worthless.
Did you feel this way?

DPS_25
1  Yes
2  No
  DK, RF  (Go to DEP_END)

DEP_D25
If DEP_Q25 = 1 (Yes), ^DT_KEYPHRASEQ25 = "Feeling down on yourself".
Otherwise, ^DT_KEYPHRASEQ25 = "null".

DEP_Q26
Did you think a lot about death - either your own, someone else’s, or death in
general?

DPS_26
1  Yes
2  No
  DK, RF  (Go to DEP_END)

DEP_D26
If DEP_Q26 = 1 (Yes), ^DT_KEYPHRASEQ26 = "Thoughts about death".
Otherwise, ^DT_KEYPHRASEQ26 = "null".

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
(^DT_KEYPHRASEQ19, ^DT_KEYPHRASEQ20, ^DT_KEYPHRASEQ22,
^DT_KEYPHRASEQ24, ^DT_KEYPHRASEQ25, ^DT_KEYPHRASEQ26).

INTERVIEWER: Press <Enter> to continue.

DEP_Q27
About how many weeks did you feel this way during the past 12 months?

DPS_27
|___| Weeks
(MIN: 2) (MAX: 53)
  DK, RF  (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

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
DK, RF

DEP_END
Suicidal thoughts and attempts (SUI)

SUI_BEG  Optional Content (See Appendix 2)

SUI_C1A  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?

SUI_1

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

SUI_Q2  Has this happened in the past 12 months?

SUI_2

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

SUI_Q3  Have you ever attempted to commit suicide or tried taking your own life?

SUI_3

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

SUI_Q4  Did this happen in the past 12 months?

SUI_4

1  Yes
2  No (Go to SUI_END)
    DK, RF (Go to SUI_END)
SUI_Q5

Do 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, RF  (Go to SUI_END)

SUI_Q6

Whom did you see or talk to?

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SUI_6A</td>
<td>1 Family doctor or general practitioner</td>
</tr>
<tr>
<td>SUI_6B</td>
<td>2 Psychiatrist</td>
</tr>
<tr>
<td>SUI_6C</td>
<td>3 Psychologist</td>
</tr>
<tr>
<td>SUI_6D</td>
<td>4 Nurse</td>
</tr>
<tr>
<td>SUI_6E</td>
<td>5 Social worker or counsellor</td>
</tr>
<tr>
<td>SUI_6G</td>
<td>6 Religious or spiritual advisor such as a priest, chaplain or rabbi</td>
</tr>
<tr>
<td>SUI_6H</td>
<td>7 Teacher or guidance counsellor</td>
</tr>
<tr>
<td>SUI_6F</td>
<td>8 Other</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

SUI_END
Health status (SF-36) (SFR)

SFR_BEG  Optional Content (See Appendix 2)

SFR_C03  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^S and how well ^YOU1 ^ARE able to do ^YOUR1 usual activities.

INTERVIEWER: Press <Enter> to continue.

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, RF  (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, RF
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, RF  

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, RF  

SFR_Q07  
(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, RF  

SFR_Q08  
(Does ^YOUR1 health limit ^HIMHER:)  
...in bending, kneeling, or stooping?  
1  Limited a lot  
2  Limited a little  
3  Not at all limited  
  DK, RF  

SFR_Q09  
(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, RF
SFR_Q10  
(Does ^YOUR1 health limit ^HIMHER:) 

SFR_10 
...in walking several blocks? 

1 Limited a lot  
2 Limited a little  
3 Not at all limited  
   DK, RF

SFR_Q11  
(Does ^YOUR1 health limit ^HIMHER:) 

SFR_11 
...in walking one block? 

1 Limited a lot  
2 Limited a little  
3 Not at all limited  
   DK, RF

SFR_Q12  
(Does ^YOUR1 health limit ^HIMHER:) 

SFR_12 
...in bathing and dressing ^YOURSELF? 

1 Limited a lot  
2 Limited a little  
3 Not at all limited  
   DK, RF

SFR_Q13  
Now a few questions about problems with ^YOUR2 work or with other regular daily activities. Because of ^YOUR1 physical health, during the past 4 weeks, did ^YOU2: 

SFR_13 
...cut down on the amount of time ^YOU1 spent on work or other activities? 

1 Yes  
2 No  
   DK, RF

SFR_Q14  
Because of ^YOUR1 physical health, during the past 4 weeks, did ^YOU2: 

SFR_14 
...accomplish less than ^YOU1 would like? 

1 Yes  
2 No  
   DK, RF
SFR_Q15 (Because of ^YOUR1 physical health, during the past 4 weeks,) ^WERE ^YOU2:

...limited in the kind of work or other activities?

1  Yes
2  No
   DK, RF

SFR_Q16 (Because of ^YOUR1 physical health, during the past 4 weeks,) did ^YOU2:

...have difficulty performing the work or other activities (for example, it took extra effort)?

1  Yes
2  No
   DK, RF

SFR_Q17 Next a few questions about problems with ^YOUR2 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 ^YOU2:

...cut down on the amount of time ^YOU1 spent on work or other activities?

1  Yes
2  No
   DK
   RF   (Go to SFR_END)

SFR_Q18 Because of emotional problems, during the past 4 weeks, did ^YOU2:

...accomplish less than ^YOU1 would like?

1  Yes
2  No
   DK, RF

SFR_Q19 (Because of emotional problems, during the past 4 weeks,) did ^YOU2:

...not do work or other activities as carefully as usual?

1  Yes
2  No
   DK, RF
SFR_Q20
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, RF

SFR_Q21
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, RF

SFR_Q22
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, RF

SFR_R23
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, RF

(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, RF

(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, RF
SFR_Q26
(SDuring 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, RF

SFR_Q27  
(SDuring 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, RF

SFR_Q28  
(SDuring 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, RF

SFR_Q29  
(SDuring the past 4 weeks, how much of the time:)  
...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, RF
SFR_Q30
(SDuring the past 4 weeks, how much of the time:) 
SFR_30
...^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, RF

SFR_Q31
(During the past 4 weeks, how much of the time:) 
SFR_31
...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, RF

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, RF

SFR_D33
If interview is non-proxy, ^DT_FNAMEI = "I". 
Otherwise, ^DT_FNAMEI = "^NAME".
SFR_Q33

Now please tell me the answer that best describes how true or false each of the following statements is for ^YOU2.

^DT_FNAME^I seem^S 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, RF

SFR_D34A  If interview is non-proxy, ^DT_AMIS = "am".
          Otherwise, ^DT_AMIS = "is".

SFR_D34B  If interview is non-proxy, ^DT_IHESHE = "I".
          If interview is proxy and sex = male, ^DT_IHESHE = "he".
          Otherwise, ^DT_IHESHE = "she".

SFR_D34C  (not applicable)

SFR_D34D  (not applicable)

SFR_Q34

(Please tell me the answer that best describes how true or false each of the following statements is for ^YOU2.)

^DT_FNAME^I ^DT_AMIS as healthy as anybody ^DT_IHESHE know^S.

INTERVIEWER: Read categories to respondent.

1  Definitely true
2  Mostly true
3  Not sure
4  Mostly false
5  Definitely false
   DK, RF

SFR_D35A  If interview is non-proxy, ^DT_MYHISHER = "my".
          If interview is proxy and sex = male, ^DT_MYHISHER = "his".
          Otherwise, ^DT_MYHISHER = "her".
SFR_Q35  
(Please tell me the answer that best describes how true or false each of the following statements is for ^YOU^2.)

^DT_FNAME^ expect^S ^DT_MYHISHER health to get worse.

  1. Definitely true
  2. Mostly true
  3. Not sure
  4. Mostly false
  5. Definitely false
     DK, RF

SFR_Q36  
(Please tell me the answer that best describes how true or false each of the following statements is for ^YOU^2.)

^DT_MYNAME^ health is excellent.

  1. Definitely true
  2. Mostly true
  3. Not sure
  4. Mostly false
  5. Definitely false
     DK, RF
Stigma towards depression (STG)

STG_BEG  Content block

External variables required:

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DOSTG: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space

STG_C01A  If DOSTG = 1, go to STG_C01B.
Otherwise, go to STG_END.

STG_C01B  If PROXMODE = 1, go to STG_END.
Otherwise, go to STG_R01.

STG_R01  The next questions deal with how people feel toward those who have had depression. By depression, we mean a prolonged period of sadness or loss of interest in usual activities that interferes in daily life.

I am going to read you a series of statements. For each of the following statements, please tell me how you think most people you know would feel even if you don’t share their opinion. We’ll ask about your own personal views later.

INTERVIEWER: Press <Enter> to continue.

STG_Q01  Most people you know would not willingly accept someone who has had depression as a close friend. Do you:

INTERVIEWER: Read categories to respondent. Most people you know includes for example family, friends, colleagues.

1  ... strongly agree?
2  ... agree?
3  ... neither agree nor disagree?
4  ... disagree?
5  ... strongly disagree?
DK, RF
STG_Q02  Most people you know believe that someone who has had depression is not trustworthy. (Do you:)

INTERVIEWER: If necessary, read categories to respondent. Most people you know includes for example family, friends, colleagues.

1  ... strongly agree?
2  ... agree?
3  ... neither agree nor disagree?
4  ... disagree?
5  ... strongly disagree?
   DK, RF

STG_Q03  Most people you know think less of a person who has had depression. (Do you:)

INTERVIEWER: If necessary, read categories to respondent. Most people you know includes for example family, friends, colleagues.

1  ... strongly agree?
2  ... agree?
3  ... neither agree nor disagree?
4  ... disagree?
5  ... strongly disagree?
   DK, RF

STG_Q04  Most employers would not consider an application from someone who has had depression. Do you:

INTERVIEWER: Read categories to respondent. Most people you know includes for example family, friends, colleagues.

1  ... strongly agree?
2  ... agree?
3  ... neither agree nor disagree?
4  ... disagree?
5  ... strongly disagree?
   DK, RF
STG_Q05 Most people you know would be reluctant to date someone who has had depression. (Do you:)

INTERVIEWER: If necessary, read categories to respondent. Most people you know includes for example family, friends, colleagues.

1 ... strongly agree?
2 ... agree?
3 ... neither agree nor disagree?
4 ... disagree?
5 ... strongly disagree?
   DK, RF

STG_Q06 Once they know a person has had depression, most people you know would take their opinions less seriously. (Do you:)

INTERVIEWER: If necessary, read categories to respondent. Most people you know includes for example family, friends, colleagues.

1 ... strongly agree?
2 ... agree?
3 ... neither agree nor disagree?
4 ... disagree?
5 ... strongly disagree?
   DK, RF

STG_Q07 Now, think about your own feelings. Overall, you share the opinions of most people you know regarding people who have had depression. Do you:

INTERVIEWER: If necessary, read categories to respondent. Most people you know includes for example family, friends, colleagues.

1 ... strongly agree?
2 ... agree?
3 ... neither agree nor disagree?
4 ... disagree?
5 ... strongly disagree?
   DK, RF

STG_B08 Call Sub-bloc "Mental Health Experiences" (MHE)
Mental Health Experiences - sub-bloc (MHE)

MHE_BEG Content block

External variables required:

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DONME: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space

MHE_C01A If PROXMODE = 1, go to MHE_END.
Otherwise, go to MHE_R01.

MHE_R01 The following questions ask about your personal experiences with people who
have had emotional or mental health problems. By this, we mean emotional or
mental conditions that may need treatment from a health professional.

INTERVIEWER: Press <Enter> to continue.

MHE_Q01A Have you ever worked or volunteered in a program that provides treatment services
to people with emotional or mental health problems?

INTERVIEWER: For these questions, do not include substance abuse.

1  Yes
2  No  (Go to MHE_Q02A)
   DK, RF  (Go to MHE_Q02A)

MHE_Q01B Was this in the past 12 months?

1  Yes
2  No
   DK, RF
MHE_Q02A  To your knowledge, have you ever worked with someone who has been treated for an emotional or mental health problem?

INTERVIEWER: This question refers to working as colleagues. If the respondent worked or volunteered in a program that provides mental health treatment services, those clients should not be counted again in this question.

1  Yes
2  No  (Go to MHE_Q03A)
   DK, RF  (Go to MHE_Q03A)

MHE_Q02B  Was this in the past 12 months?

1  Yes
2  No
   DK, RF

MHE_Q03A  Has a close member of your family, such as a spouse, a parent, a child, a brother or a sister, ever received treatment for an emotional or mental health problem?

1  Yes
2  No  (Go to MHE_Q04A)
   DK, RF  (Go to MHE_Q04A)

MHE_Q03B  Was this in the past 12 months?

1  Yes
2  No
   DK, RF

MHE_Q04A  Have any of your close friends ever been treated for an emotional or mental health problem?

1  Yes
2  No  (Go to MHE_Q05A)
   DK, RF  (Go to MHE_Q05A)

MHE_Q04B  Was this in the past 12 months?

1  Yes
2  No
   DK, RF

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MHE_Q05A  Have you ever received treatment for an emotional or mental health problem?

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

MHE_Q05B  Was this in the past 12 months?

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

MHE_Q06  During the past 12 months, did you feel that anyone held negative opinions about you or treated you unfairly because of your past or current emotional or mental health problem?

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

MHE_R06B  Please tell me how this affected you. For each question, answer with a number between 0 and 10; where 0 means you have not been affected while 10 means you have been severely affected.

INTERVIEWER: Press <Enter> to continue.

MHE_Q06A  During the past 12 months, on a scale of 0 to 10, how much did these negative opinions or unfair treatment affect:

… your family relationships?

INTERVIEWER: If necessary, please clarify that the question is intended to focus on the impact of the negative opinions expressed by others or unfair treatment received, not the impact of the emotional or mental health problem itself.

   0 means has not been affected while 10 means has been severely affected.

   _ _ _
   (MIN: 0) (MAX: 10)
   DK, RF
MHE_Q06B  
(During the past 12 months, on a scale of 0 to 10, how much did these negative opinions or unfair treatment affect?)

... your romantic life?

INTERVIEWER: If necessary, please clarify that the question is intended to focus on the impact of the negative opinions expressed by others or unfair treatment received, not the impact of the emotional or mental health problem itself. 0 means has not been affected while 10 means has been severely affected.

|___| (MIN: 0) (MAX: 10)  
DK, RF

MHE_Q06C  
(During the past 12 months, on a scale of 0 to 10, how much did these negative opinions or unfair treatment affect?)

... your work or school life?

INTERVIEWER: If necessary, enter "11" to indicate "Not applicable". If necessary, please clarify that the question is intended to focus on the impact of the negative opinions expressed by others or unfair treatment received, not the impact of the emotional or mental health problem itself. 0 means has not been affected while 10 means has been severely affected.

|___| (MIN: 0) (MAX: 11)  
DK, RF

MHE_Q06D  
(During the past 12 months, on a scale of 0 to 10, how much did these negative opinions or unfair treatment affect?)

... your financial situation?

INTERVIEWER: If necessary, please clarify that the question is intended to focus on the impact of the negative opinions expressed by others or unfair treatment received, not the impact of the emotional or mental health problem itself. 0 means has not been affected while 10 means has been severely affected.

|___| (MIN: 0) (MAX: 10)  
DK, RF
MHE_Q06E

(During the past 12 months, on a scale of 0 to 10, how much did these negative opinions or unfair treatment affect?)

...your housing situation?

INTERVIEWER: If necessary, please clarify that the question is intended to focus on the impact of the negative opinions expressed by others or unfair treatment received, not the impact of the emotional or mental health problem itself. 0 means has not been affected while 10 means has been severely affected.

[ ] [ ]
(MIN: 0) (MAX: 10)
DK, RF

MHE_END
Access to health care services (ACC)

ACC_BEG  Theme content. Only asked of a sub-sample.

ACC_C1  If (do ACC block = 1), go to ACC_C2.
         Otherwise, go to ACC_END.

ACC_C2  If proxy interview or if age < 15, go to ACC_END.
         Otherwise, go to ACC_D10.

ACC_D10 If respondent is male, ^DT_SPECIALIST = "urologist".
         Otherwise, ^DT_SPECIALIST = "gynaecologist".

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, ^DT_SPECIALIST 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?

ACC_10

1  Yes
2  No   (Go to ACC_R20)
      DK, RF   (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?

ACC_11

1  Yes
2  No   (Go to ACC_R20)
      DK, RF   (Go to ACC_R20)
ACC_Q12  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

| ACC_12A | 01 Difficulty getting a referral |
| ACC_12B | 02 Difficulty getting an appointment |
| ACC_12C | 03 No specialists in the area |
| ACC_12D | 04 Waited too long - between booking appointment and visit |
| ACC_12E | 05 Waited too long - to see the doctor (i.e. in-office waiting) |
| ACC_12F | 06 Transportation - problems |
| ACC_12G | 07 Language - problem |
| ACC_12H | 08 Cost |
| ACC_12I | 09 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 (Go to ACC_S12) |

DK, RF

Go to ACC_R20

ACC_S12  INTERVIEWER: Specify.

(80 spaces)

DK, RF

ACC_R20  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?

ACC_20

| Yes |
| No   |

2   (Go to ACC_R30)

DK, RF  (Go to ACC_R30)

ACC_Q21  In the past 12 months, did you ever experience any difficulties getting the surgery you needed?

ACC_21

| Yes |
| No   |

1   (Go to ACC_R30)

2   (Go to ACC_R30)

DK, RF  (Go to ACC_R30)
ACC_Q22  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

| ACC_22A  | 01 Difficulty getting an appointment with a surgeon |
| ACC_22B  | 02 Difficulty getting a diagnosis                  |
| ACC_22C  | 03 Waited too long - for a diagnostic test         |
| ACC_22D  | 04 Waited too long - for a hospital bed to become available |
| ACC_22E  | 05 Waited too long - for surgery                   |
| ACC_22F  | 06 Service not available - in the area             |
| ACC_22G  | 07 Transportation - problems                       |
| ACC_22H  | 08 Language - problem                              |
| ACC_22I  | 09 Cost                                           |
| ACC_22J  | 10 Personal or family responsibilities             |
| ACC_22K  | 11 General deterioration of health                 |
| ACC_22L  | 12 Appointment cancelled 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 (Go to ACC_S22)                |

Go to ACC_R30

ACC_S22  INTERVIEWER: Specify.

(80 spaces)

DK, RF

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?

| ACC_30   | Yes                                         |
|          | 2   No                                       |

(Go to ACC_R40)

DK, RF

(Go to ACC_R40)

ACC_Q31  In the past 12 months, did you ever experience any difficulties getting the tests you needed?

| ACC_31   | Yes                                         |
|          | 2   No                                       |

(Go to ACC_R40)

DK, RF

(Go to ACC_R40)
### ACC_Q32

**What type of difficulties did you experience?**

**INTERVIEWER:** Mark all that apply.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACC_32A</td>
<td>Difficulty getting a referral</td>
</tr>
<tr>
<td>ACC_32B</td>
<td>Difficulty getting an appointment</td>
</tr>
<tr>
<td>ACC_32C</td>
<td>Waited too long - to get an appointment</td>
</tr>
<tr>
<td>ACC_32D</td>
<td>Waited too long - to get test (i.e. in-office waiting)</td>
</tr>
<tr>
<td>ACC_32E</td>
<td>Service not available - at time required</td>
</tr>
<tr>
<td>ACC_32F</td>
<td>Service not available - in the area</td>
</tr>
<tr>
<td>ACC_32G</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>ACC_32H</td>
<td>Language - problem</td>
</tr>
<tr>
<td>ACC_32I</td>
<td>Cost</td>
</tr>
<tr>
<td>ACC_32J</td>
<td>General deterioration of health</td>
</tr>
<tr>
<td>ACC_32K</td>
<td>Did not know where to go (i.e. information problems)</td>
</tr>
<tr>
<td>ACC_32L</td>
<td>Still waiting for test</td>
</tr>
<tr>
<td>ACC_32M</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>ACC_32N</td>
<td>Other - Specify (Go to ACC_S32)</td>
</tr>
</tbody>
</table>

Go to ACC_R40

### ACC_S32

**INTERVIEWER:** Specify.

__________________________

(80 spaces)

DK, RF

### 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?**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
</tbody>
</table>

(Go to ACC_R50)

DK, RF (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   | Doctor’s office   |
| ACC_40B   | Community health centre / CLSC |
| ACC_40C   | Walk-in clinic    |
| ACC_40D   | Telephone health line (for example, HealthLinks, Telehealth Ontario, Health-Line, TeleCare, Info-Santé) |
| ACC_40E   | Hospital emergency room |
| ACC_40F   | Other hospital service |
| ACC_40G   | Other - Specify (Go to ACC_S40A) |

Go to ACC_Q41

ACC_S40A  INTERVIEWER: Specify.

(80 spaces)

DK, RF

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?

| ACC_41   | Yes   |
| ACC_42   | No    (Go to ACC_R50) |
| ACC_43   | Not required at this time (Go to ACC_Q44) |

DK, RF  (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".

| ACC_44   | Yes   |
| ACC_45   | No    (Go to ACC_Q44) |
| ACC_46   | Not required at this time (Go to ACC_Q44) |

DK, RF  (Go to ACC_Q44)
ACC_Q43  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ACC_43A</td>
<td>1</td>
<td>Difficulty contacting a physician or nurse</td>
</tr>
<tr>
<td>ACC_43B</td>
<td>2</td>
<td>Did not have a phone number</td>
</tr>
<tr>
<td>ACC_43C</td>
<td>3</td>
<td>Could not get through (i.e. no answer)</td>
</tr>
<tr>
<td>ACC_43D</td>
<td>4</td>
<td>Waited too long to speak to someone</td>
</tr>
<tr>
<td>ACC_43E</td>
<td>5</td>
<td>Did not get adequate info or advice</td>
</tr>
<tr>
<td>ACC_43F</td>
<td>6</td>
<td>Language - problem</td>
</tr>
<tr>
<td>ACC_43G</td>
<td>7</td>
<td>Did not know where to go / call / uninformed</td>
</tr>
<tr>
<td>ACC_43H</td>
<td>8</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>ACC_43I</td>
<td>9</td>
<td>Other - Specify (Go to ACC_S43)</td>
</tr>
</tbody>
</table>

Go to ACC_Q44

ACC_S43  INTERVIEWER: Specify.

(80 spaces)

DK, RF

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".

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>No (Go to ACC_Q46)</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Not required at this time (Go to ACC_Q46)</td>
</tr>
</tbody>
</table>

Go to ACC_Q46

ACC_Q45  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ACC_45A</td>
<td>1</td>
<td>Difficulty contacting a physician or nurse</td>
</tr>
<tr>
<td>ACC_45B</td>
<td>2</td>
<td>Did not have a phone number</td>
</tr>
<tr>
<td>ACC_45C</td>
<td>3</td>
<td>Could not get through (i.e. no answer)</td>
</tr>
<tr>
<td>ACC_45D</td>
<td>4</td>
<td>Waited too long to speak to someone</td>
</tr>
<tr>
<td>ACC_45E</td>
<td>5</td>
<td>Did not get adequate info or advice</td>
</tr>
<tr>
<td>ACC_45F</td>
<td>6</td>
<td>Language - problem</td>
</tr>
<tr>
<td>ACC_45G</td>
<td>7</td>
<td>Did not know where to go / call / uninformed</td>
</tr>
<tr>
<td>ACC_45H</td>
<td>8</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>ACC_45I</td>
<td>9</td>
<td>Other - Specify (Go to ACC_S45)</td>
</tr>
</tbody>
</table>

DK, RF

Go to ACC_Q46
ACC_S45  INTERVIEWER: Specify.

(80 spaces)
DK, RF

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  (Go to ACC_R50)
2   No  (Go to ACC_R50)
3  Not required at this time  (Go to ACC_R50)
DK, RF  (Go to ACC_R50)

ACC_Q47  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

ACC_47A  1   Difficulty contacting a physician or nurse
ACC_47B  2   Did not have a phone number
ACC_47C  3   Could not get through (i.e. no answer)
ACC_47D  4   Waited too long to speak to someone
ACC_47E  5   Did not get adequate info or advice
ACC_47F  6   Language - problem
ACC_47G  7   Did not know where to go / call / uninformed
ACC_47H  8   Unable to leave the house because of a health problem
ACC_47I  9   Other - Specify  (Go to ACC_S47)
DK, RF  (Go to ACC_R50)

Go to ACC_R50

ACC_S47  INTERVIEWER: Specify.

(80 spaces)
DK, RF

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.
### ACC_Q50A: Do you have a regular family doctor?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DK, RF

### ACC_Q50: In the past 12 months, did you require any routine or on-going care for yourself or a family member?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Go to ACC_R60)

DK, RF (Go to ACC_R60)

### ACC_Q51: In the past 12 months, did you ever experience any difficulties getting the routine or on-going care you or a family member needed?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Go to ACC_R60)

DK, RF (Go to ACC_R60)

### ACC_Q52: 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".

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not required at this time</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Not required at this time</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Go to ACC_Q54)

DK, RF (Go to ACC_Q54)

DK, RF (Go to ACC_Q54)
**ACC_Q53**  What type of difficulties did you experience?

**INTERVIEWER:** Mark all that apply.

<table>
<thead>
<tr>
<th>ACC_53A</th>
<th>01</th>
<th>Difficulty contacting a physician</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACC_53B</td>
<td>02</td>
<td>Difficulty getting an appointment</td>
</tr>
<tr>
<td>ACC_53C</td>
<td>03</td>
<td>Do not have personal / family physician</td>
</tr>
<tr>
<td>ACC_53D</td>
<td>04</td>
<td>Waited too long - to get an appointment</td>
</tr>
<tr>
<td>ACC_53E</td>
<td>05</td>
<td>Waited too long - to see the doctor (i.e. in-office waiting)</td>
</tr>
<tr>
<td>ACC_53F</td>
<td>06</td>
<td>Service not available - at time required</td>
</tr>
<tr>
<td>ACC_53G</td>
<td>07</td>
<td>Service not available - in the area</td>
</tr>
<tr>
<td>ACC_53H</td>
<td>08</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>ACC_53I</td>
<td>09</td>
<td>Language - problem</td>
</tr>
<tr>
<td>ACC_53J</td>
<td>10</td>
<td>Cost</td>
</tr>
<tr>
<td>ACC_53K</td>
<td>11</td>
<td>Did not know where to go (i.e. information problems)</td>
</tr>
<tr>
<td>ACC_53L</td>
<td>12</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>ACC_53M</td>
<td>13</td>
<td>Other - Specify (Go to ACC_S53)</td>
</tr>
</tbody>
</table>

Go to ACC_Q54

**ACC_S53**

**INTERVIEWER:** Specify.

<table>
<thead>
<tr>
<th>(80 spaces)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**ACC_Q54**

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)

DK, RF  (Go to ACC_R60)
What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Difficulty contacting a physician</td>
</tr>
<tr>
<td>02</td>
<td>Difficulty getting an appointment</td>
</tr>
<tr>
<td>03</td>
<td>Do not have personal / family physician</td>
</tr>
<tr>
<td>04</td>
<td>Waited too long - to get an appointment</td>
</tr>
<tr>
<td>05</td>
<td>Waited too long - to see the doctor (i.e. in-office waiting)</td>
</tr>
<tr>
<td>06</td>
<td>Service not available - at time required</td>
</tr>
<tr>
<td>07</td>
<td>Service not available - in the area</td>
</tr>
<tr>
<td>08</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>09</td>
<td>Language - problem</td>
</tr>
<tr>
<td>10</td>
<td>Cost</td>
</tr>
<tr>
<td>11</td>
<td>Did not know where to go (i.e. information problems)</td>
</tr>
<tr>
<td>12</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>13</td>
<td>Other - Specify (Go to ACC_S55)</td>
</tr>
</tbody>
</table>

Go to ACC_R60

INTERVIEWER: Specify.

(80 spaces)

DK, RF

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, RF (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, RF (Go to ACC_END)
**ACC_Q62**
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, RF  (Go to ACC_Q64)

**ACC_Q63**
What type of difficulties did you experience?

**INTERVIEWER:** Mark all that apply.

ACC_63A  01 Difficulty contacting a physician
ACC_63B  02 Difficulty getting an appointment
ACC_63C  03 Do not have personal / family physician
ACC_63D  04 Waited too long - to get an appointment
ACC_63E  05 Waited too long - to see the doctor (i.e. in-office waiting)
ACC_63F  06 Service not available - at time required
ACC_63G  07 Service not available - in the area
ACC_63H  08 Transportation - problems
ACC_63I  09 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  (Go to ACC_S63)
   DK, RF  (Go to ACC_S63)

Go to ACC_Q64

**ACC_S63**
INTERVIEWER: Specify.

(60 spaces)

DK, RF

**ACC_Q64**
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, RF  (Go to ACC_Q66)
What type of difficulties did you experience?

INTERVIEWER: Mark all that apply.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Difficulty contacting a physician</td>
</tr>
<tr>
<td>02</td>
<td>Difficulty getting an appointment</td>
</tr>
<tr>
<td>03</td>
<td>Do not have personal / family physician</td>
</tr>
<tr>
<td>04</td>
<td>Waited too long - to get an appointment</td>
</tr>
<tr>
<td>05</td>
<td>Waited too long - to see the doctor (i.e. in-office waiting)</td>
</tr>
<tr>
<td>06</td>
<td>Service not available - at time required</td>
</tr>
<tr>
<td>07</td>
<td>Service not available - in the area</td>
</tr>
<tr>
<td>08</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>09</td>
<td>Language - problem</td>
</tr>
<tr>
<td>10</td>
<td>Cost</td>
</tr>
<tr>
<td>11</td>
<td>Did not know where to go (i.e. information problems)</td>
</tr>
<tr>
<td>12</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>13</td>
<td>Other - Specify (Go to ACC_S65)</td>
</tr>
</tbody>
</table>

Go to ACC_Q66

INTERVIEWER: Specify.

(80 spaces)

DK, RF

Did you experience difficulties getting such care 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_END)
3 Not required at this time (Go to ACC_END)

DK, RF (Go to ACC_END)
ACC_Q67 | **What type of difficulties did you experience?**

**INTERVIEWER:** Mark all that apply.

| ACC_67A | Difficulty contacting a physician |
| ACC_67B | Difficulty getting an appointment |
| ACC_67C | Do not have personal / family physician |
| ACC_67D | Waited too long - to get an appointment |
| ACC_67E | Waited too long - to see the doctor (i.e. in-office waiting) |
| ACC_67F | Service not available - at time required |
| ACC_67G | Service not available - in the area |
| ACC_67H | Transportation - problems |
| ACC_67I | Language - problem |
| ACC_67J | Cost |
| ACC_67K | Did not know where to go (i.e. information problems) |
| ACC_67L | Unable to leave the house because of a health problem |
| ACC_67M | Other - Specify | (Go to ACC_S67) |

Acc_67L: Other - Specify | (Go to ACC_S67) |

ACC_END

ACC_S67 | **INTERVIEWER:** Specify.

(80 spaces)

DK, RF

ACC_END
Waiting times (WTM)

WTM_BEG  Theme content. Only asked of a sub-sample.

WTM_C01  If (do WTM block = 1), go to WTM_C02.
          Otherwise, go to WTM_END.

WTM_C02  If proxy interview or if age < 15, go to WTM_END.
          Otherwise, go to WTM_C03.

WTM_C03  If ACC_Q10 = 2 (did not require a visit to a specialist) and ACC_Q20 = 2 (did not require non emergency surgery) and ACC_Q30 = 2 (did not require tests) or (ACC_Q10 = (DK, RF, BLANK) and ACC_Q20 = (DK, RF, BLANK) and ACC_Q30 = (DK, RF, BLANK)) or ((ACCS_Q10 = 2 and ACCS_Q20 = 2 and ACCS_Q30 = 2) or (ACCS_Q10 = (DK, RF, BLANK) and ACCS_Q20 = (DK, RF, BLANK) and ACCS_Q30 = (DK, RF, BLANK)), go to WTM_END.
          Otherwise, go to WTM_R1.

WTM_R1  Now some additional questions about your experiences waiting for health care services.

INTERVIEWER: Press <Enter> to continue.

WTM_C04  If ACC_Q10 = (2, DK, RF, BLANK) or ACCS_Q10 = (2, DK, RF, BLANK), go to WTM_C16.
          Otherwise, go to WTM_C01.

WTM_Q01  You mentioned that you required a visit to a medical specialist such as a cardiologist, allergist, gynaecologist or psychiatrist.

In the past 12 months, did you require a visit to a medical specialist for a diagnosis or a consultation for a new illness or condition?

1  Yes
2  No        (Go to WTM_C16)
          DK, RF     (Go to WTM_C16)

WTM_D02  If sex = female, ^DT_GYNAECO = "Gynaecological problems".
          Otherwise, ^DT_GYNAECO = "null".
WTM_Q02  For what type of condition?

WTM_02  If you have had more than one such visit, please answer for the most recent visit.

INTERVIEWER: Read categories to respondent.

1  Heart condition or stroke
2  Cancer
3  Asthma or other breathing conditions
4  Arthritis
5  Cataract or other eye conditions
6  Mental health disorder
7  Skin conditions
8  DT_GYNAECO
9  Other - Specify (Go to WTM_S02)
   DK, RF

Go to WTM_Q03

WTM_E02  A blank answer has been selected. Please return and correct.

Note: Trigger hard edit if WTM_Q02 = 8 and sex = male.

WTM_S02  INTERVIEWER: Specify.

(80 spaces)
   DK, RF

WTM_Q03  Were you referred by:

WTM_03  INTERVIEWER: Read categories to respondent.

1  ... a family doctor?
2  ... another specialist?
3  ... another health care provider?
4  Did not require a referral
   DK, RF

WTM_Q04  Have you already visited the medical specialist?

WTM_04  1  Yes
2  No (Go to WTM_Q08A)
   DK, RF (Go to WTM_Q08A)
WTM_Q05  Thinking about this visit, did you experience any difficulties seeing the specialist?

1 Yes
2 No  (Go to WTM_D07A)

WTM_Q06  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply. Question ACC_Q12 previously asked about any difficulties getting specialist care. This question (WTM_Q06) deals with difficulties experienced for the most recent visit for a new illness or condition.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Difficulty getting a referral</td>
</tr>
<tr>
<td>02</td>
<td>Difficulty getting an appointment</td>
</tr>
<tr>
<td>03</td>
<td>No specialists in the area</td>
</tr>
<tr>
<td>04</td>
<td>Waited too long - between booking appointment and visit</td>
</tr>
<tr>
<td>05</td>
<td>Waited too long - to see the doctor (i.e. in-office waiting)</td>
</tr>
<tr>
<td>06</td>
<td>Transportation - problems</td>
</tr>
<tr>
<td>07</td>
<td>Language - problem</td>
</tr>
<tr>
<td>08</td>
<td>Cost</td>
</tr>
<tr>
<td>09</td>
<td>Personal or family responsibilities</td>
</tr>
<tr>
<td>10</td>
<td>General deterioration of health</td>
</tr>
<tr>
<td>11</td>
<td>Appointment cancelled or deferred by specialist</td>
</tr>
<tr>
<td>12</td>
<td>Unable to leave the house because of a health problem</td>
</tr>
<tr>
<td>13</td>
<td>Other - Specify (Go to WTM_S06)</td>
</tr>
</tbody>
</table>

WTM_S06  INTERVIEWER: Specify.

(80 spaces)

DK, RF

WTM_D07A  If WTM_Q03 = 1 or 2, ^DT_APPOINTMENT = "you and your doctor decided that you should see a specialist".
If WTM_Q03 = 3, ^DT_APPOINTMENT = "you and your health care provider decided that you should see a specialist".
Otherwise, ^DT_APPOINTMENT = "the appointment was initially scheduled".

WTM_Q07A  How long did you have to wait between when ^DT_APPOINTMENT and when you actually visited the specialist?

INTERVIEWER: Probe to get the most precise answer possible.

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</table>

(MIN: 1) (MAX: 365)
DK, RF  (Go to WTM_D10)
WTM_N07B INTERVIEWER: Enter unit of time.

WTM_07B
1 Days
2 Weeks
3 Months

(DK, RF are not allowed)
Go to WTM_D10

WTM_E07B An unusual number has been entered. Please confirm.

Note: Trigger soft edit if (WTM_Q07A > 31 and WTM_N07B = 1) or (WTM_Q07A > 12 and WTM_N07B = 2) or (WTM_Q07A > 18 and WTM_N07B = 3).

WTM_Q08A How long have you been waiting since ^DT_APPOINTMENT? WTM_08A INTERVIEWER: Probe to get the most precise answer possible.

|   |   |   |
---|---|---|
   |   |   |

(MIN: 1) (MAX: 365)
DK, RF (Go to WTM_D10)

WTM_N08B INTERVIEWER: Enter unit of time.

WTM_08B
1 Days
2 Weeks
3 Months

(DK, RF are not allowed)

WTM_E08B An unusual number has been entered. Please confirm.

Note: Trigger soft edit if (WTM_Q08A > 31 and WTM_N08B = 1) or (WTM_Q08A > 12 and WTM_N08B = 2), or (WTM_Q08A > 18 and WTM_N08B = 3).

WTM_D10 If WTM_Q04 = 1, ^DT_WAITTIME1 = "was the waiting time". Otherwise, ^DT_WAITTIME1 = "has the waiting time been".

WTM_Q10 In your view, ^DT_WAITTIME1: WTM_10 INTERVIEWER: Read categories to respondent. It is important to make a distinction between "No view" and "Don’t Know".

1 ...acceptable? (Go to WTM_Q12)
2 ...not acceptable?
3 No view
DK, RF
**WTM_Q11A**

In this particular case, what do you think is an acceptable waiting time?

**WTM_11A**

\[\text{___} \text{___} \text{___} \text{___}\]

(MIN: 1) (MAX: 365)

DK, RF (Go to WTM_Q12)

**WTM_N11B**

INTERVIEWER: Enter unit of time.

**WTM_11B**

1 Days
2 Weeks
3 Months

(DK, RF are not allowed)

**WTM_E11B**

An unusual number has been entered. Please confirm.

**Note:**

Trigger soft edit if \((WTM_{Q11A} > 31 \text{ and } WTM_{N11B} = 1)\) or \((WTM_{Q11A} > 12 \text{ and } WTM_{N11B} = 2)\) or \((WTM_{Q11A} > 18 \text{ and } WTM_{N11B} = 3)\).

**WTM_Q12**

Was your visit cancelled or postponed at any time?

**WTM_12**

1 Yes
2 No (Go to WTM_Q14)

DK, RF (Go to WTM_Q14)

**WTM_Q13**

Was it cancelled or postponed by:

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

**WTM_13A**

1 ...yourself?

**WTM_13B**

2 ...the specialist?

**WTM_13C**

3 Other - Specify (Go to WTM_S13)

DK, RF

Go to WTM_Q14

**WTM_S13**

INTERVIEWER: Specify.

____________________________________________________

(80 spaces)

DK, RF

**WTM_Q14**

Do you think that your health, or other aspects of your life, have been affected in any way because you had to wait for this visit?

**WTM_14**

1 Yes
2 No (Go to WTM_C16)

DK, RF (Go to WTM_C16)
WTM_Q15  How was your life affected as a result of waiting for this visit?

INTERVIEWER: Mark all that apply.

<table>
<thead>
<tr>
<th>Code</th>
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<tbody>
<tr>
<td>01</td>
<td>Worry, anxiety, stress</td>
</tr>
<tr>
<td>02</td>
<td>Worry or stress for family or friends</td>
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<tr>
<td>03</td>
<td>Pain</td>
</tr>
<tr>
<td>04</td>
<td>Problems with activities of daily living (e.g., dressing, driving)</td>
</tr>
<tr>
<td>05</td>
<td>Loss of work</td>
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<td>06</td>
<td>Loss of income</td>
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<tr>
<td>07</td>
<td>Increased dependence on relatives/friends</td>
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<td>08</td>
<td>Increased use of over-the-counter drugs</td>
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<tr>
<td>09</td>
<td>Overall health deteriorated, condition got worse</td>
</tr>
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<td>10</td>
<td>Health problem improved</td>
</tr>
<tr>
<td>11</td>
<td>Personal relationships suffered</td>
</tr>
<tr>
<td>12</td>
<td>Other - Specify (Go to WTM_S15)</td>
</tr>
</tbody>
</table>

Go to WTM_C16

WTM_S15  INTERVIEWER: Specify.

(80 spaces)

DK, RF

WTM_C16  If ACC_Q20 = (2, DK, RF, BLANK) or ACCS_Q20 = (2, DK, RF, BLANK), go to WTM_C30.
Otherwise, go to WTM_D16.

WTM_D16  If sex = female, DT_HYSTERECTOMY = "Hysterectomy (Removal of uterus)". Otherwise, DT_HYSTERECTOMY = "null".
You mentioned that in the past 12 months you required non emergency surgery.

What type of surgery did you require? If you have had more than one in the past 12 months, please answer for the most recent surgery.

INTERVIEWER: Read categories to respondent.

1. Cardiac surgery
2. Cancer related surgery
3. Hip or knee replacement surgery
4. Cataract or other eye surgery
5. ^DT_HYSTERECTOMY
6. Removal of gall bladder
7. Other - Specify  (Go to WTM_S16)
   DK, RF

Go to WTM_Q17

A blank answer has been selected. Please return and correct.

Note: Trigger hard edit if WTM_Q16 = 5 and sex = male.

INTERVIEWER: Specify.

____________________________________________________
(80 spaces)
DK, RF

Did you already have this surgery?

1. Yes
2. No  (Go to WTM_Q22)
   DK, RF  (Go to WTM_Q22)

Did the surgery require an overnight hospital stay?

1. Yes
2. No
   DK, RF

Did you experience any difficulties getting this surgery?

1. Yes
2. No  (Go to WTM_Q21A)
   DK, RF  (Go to WTM_Q21A)
WTM_Q20  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply. ACC_Q22 asked previously about any difficulties experienced getting the surgery you needed. This question (WTM_Q20) refers to difficulties experienced for the most recent non emergency surgery.

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>WTM_20A</td>
<td>01</td>
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<tr>
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<td>WTM_20C</td>
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<td>WTM_20D</td>
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<td>WTM_20E</td>
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<td>WTM_20F</td>
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<td>08</td>
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<td>WTM_20I</td>
<td>09</td>
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<td>WTM_20J</td>
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<td>WTM_20K</td>
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<tr>
<td>WTM_20L</td>
<td>12</td>
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<tr>
<td>WTM_20M</td>
<td>13</td>
</tr>
<tr>
<td>WTM_20N</td>
<td>14</td>
</tr>
</tbody>
</table>

Go to WTM_Q21A

WTM_S20  INTERVIEWER: Specify.

(80 spaces)

DK, RF

WTM_Q21A  How long did you have to wait between when you and the surgeon decided to go ahead with surgery and the day of surgery?

INTERVIEWER: Probe to get the most precise answer possible.

[ ] [ ]

(MIN: 1) (MAX: 365)

DK, RF  (Go to WTM_D24)

WTM_N21B  INTERVIEWER: Enter unit of time.

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>WTM_21A</td>
<td>1</td>
</tr>
<tr>
<td>WTM_21B</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

(DK, RF are not allowed)

Go to WTM_D24
WTM_E21B  An unusual number has been entered. Please confirm.

Note: Trigger soft edit if (WTM_Q21A > 31 and WTM_N21B = 1) or (WTM_Q21A > 12 and WTM_N21B = 2) or (WTM_Q21A > 18 and WTM_N21B=3).

WTM_Q22  Will the surgery require an overnight hospital stay?
  WTM_22
  1  Yes
  2  No
     DK, RF

WTM_Q23A  How long have you been waiting since you and the surgeon decided to go ahead with the surgery?
  WTM_23A
  INTERVIEWER: Probe to get the most precise answer possible.

  ______
  (MIN: 1) (MAX: 365)
  DK, RF  (Go to WTM_D24)

WTM_N23B  INTERVIEWER: Enter unit of time.
  WTM_23B
  1  Days
  2  Weeks
  3  Months
     (DK, RF are not allowed)

WTM_E23B  An unusual number has been entered. Please confirm.

Note: Trigger soft edit if (WTM_Q23A > 31 and WTM_N23B = 1) or (WTM_Q23A > 12 and WTM_N23B = 2) or (WTM_Q23A > 18 and WTM_N23B=3).

WTM_D24  If WTM_Q17 = 1, ^DT_WAITTIME2 = "was the waiting time". Otherwise, ^DT_WAITTIME2 = "has the waiting time been".

WTM_Q24  in your view, ^DT_WAITTIME2:
  WTM_24
  INTERVIEWER: Read categories to respondent. It is important to make a distinction between "No view" and "Don’t Know".

  1  ...acceptable?  (Go to WTM_Q26)
  2  ...not acceptable?
  3  No view
     DK, RF
In this particular case, what do you think is an acceptable waiting time?

1. Days
   2. Weeks
   3. Months

(DK, RF are not allowed)

An unusual number has been entered. Please confirm.

Note:
Trigger soft edit if (WTM_Q25A > 31 and WTM_N25B = 1) or (WTM_Q25A > 12 and WTM_N25B = 2) or (WTM_Q25A > 18 and WTM_N25B = 3).

Was your surgery cancelled or postponed at any time?

1. Yes
   2. No

Was it cancelled or postponed by:

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

1. ...yourself?
2. ...the surgeon?
3. ...the hospital?
4. Other - Specify

(80 spaces)

Do you think that your health, or other aspects of your life, have been affected in any way due to waiting for this surgery?

1. Yes
   2. No
WTM_Q29  How was your life affected as a result of waiting for surgery?

INTERVIEWER: Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
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<td>01</td>
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<tr>
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<td>Health problem improved</td>
</tr>
<tr>
<td>11</td>
<td>Personal relationships suffered</td>
</tr>
<tr>
<td>12</td>
<td>Other - Specify (Go to WTM_S29)</td>
</tr>
</tbody>
</table>

Go to WTM_C30

WTM_S29  INTERVIEWER: Specify.

______________________________________________________________________________
(80 spaces)
DK, RF

WTM_C30  If ACC_Q30 = (2, DK, RF, BLANK) or ACCS_Q30 = (2, DK, RF, BLANK), go to WTM_END.
Otherwise, go to WTM_Q30.

WTM_Q30

WTM_30  Now for MRIs, CAT Scans and angiographies provided in a non emergency situation.

You mentioned that in the past 12 months you required one of these tests.

What type of test did you require?

If you have had more than one in the past 12 months, please answer for the most recent test.

INTERVIEWER: Read categories to respondent.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MRI (Magnetic Resonance Imaging)</td>
</tr>
<tr>
<td>2</td>
<td>CAT Scan (Computed Axial Tomography)</td>
</tr>
<tr>
<td>3</td>
<td>Angiography (Cardiac Test)</td>
</tr>
</tbody>
</table>

DK, RF
WTM_Q31  For what type of condition?

WTM_31

INTERVIEWER: Read categories to respondent.

1  Heart disease or stroke
2  Cancer
3  Joints or fractures
4  Neurological or brain disorders (e.g., for MS, migraine or headaches)
5  Other - Specify  (Go to WTM_S31)

DK, RF

Go to WTM_Q32

WTM_S31

INTERVIEWER: Specify.

(80 spaces)

DK, RF

WTM_Q32  Did you already have this test?

WTM_32

1  Yes
2  No  (Go to WTM_Q39A)

DK, RF  (Go to WTM_Q39A)

WTM_Q33  Where was the test done?

WTM_33

INTERVIEWER: Read categories to respondent.

1  Hospital  (Go to WTM_Q35)
2  Public clinic  (Go to WTM_Q35)
3  Private clinic  (Go to WTM_Q34)
4  Other - Specify  (Go to WTM_S33)

DK, RF  (Go to WTM_Q36)

WTM_S33

INTERVIEWER: Specify.

(80 spaces)

DK, RF

Go to WTM_Q35
WTM_Q34  Was the clinic located:

WTM_34

INTERVIEWER: Read categories to respondent.

1  ...in your province?
2  ...in another province?
3  Other - Specify  (Go to WTM_S34)
   DK, RF

Go to WTM_Q35

WTM_S34  INTERVIEWER: Specify.

(80 spaces)
DK, RF

WTM_Q35  Were you a patient in a hospital at the time of the test?

WTM_35

1  Yes
2  No
   DK, RF

WTM_Q36  Did you experience any difficulties getting this test?

WTM_36

1  Yes
2  No  (Go to WTM_Q38A)
   DK, RF  (Go to WTM_Q38A)
WTM_Q37  What type of difficulties did you experience?

INTERVIEWER: Mark all that apply. ACC_Q32 asked previously about any difficulties experienced getting the tests you needed. This question (WTM_Q37) refers to difficulties experienced for the most recent diagnostic test.

WTM_37A  01 Difficulty getting a referral  
WTM_37B  02 Difficulty getting an appointment  
WTM_37C  03 Waited too long - to get an appointment  
WTM_37D  04 Waited too long - to get test (i.e. in-office waiting)  
WTM_37E  05 Service not available - at time required  
WTM_37F  06 Service not available - in the area  
WTM_37G  07 Transportation - problems  
WTM_37H  08 Language - problem  
WTM_37I  09 Cost  
WTM_37J  10 General deterioration of health  
WTM_37K  11 Did not know where to go (i.e. information problems)  
WTM_37L  12 Unable to leave the house because of a health problem  
WTM_37M  13 Other - Specify (Go to WTM_S37)  

DK, RF

Go to WTM_Q38A

WTM_S37  INTERVIEWER: Specify.

____________________________________________________
(80 spaces)

DK, RF

WTM_Q38A  How long did you have to wait between when you and your doctor decided to go ahead with the test and the day of the test?

INTERVIEWER: Probe to get the most precise answer possible.

|   |   |   |

(MIN: 1) (MAX: 365)

DK, RF  (Go to WTM_D40)

WTM_N38B  INTERVIEWER: Enter unit of time.

WTM_38B  1 Days  
2 Weeks  
3 Months  

(DK, RF are not allowed)

Go to WTM_D40
WTM_Q38A  How long have you been waiting for the test since you and your doctor decided to go ahead with the test?

INTERVIEWER:  Probe to get the most precise answer possible.

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>(MIN: 1) (MAX: 365)</td>
<td></td>
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<tr>
<td>DK, RF (Go to WTM_D40)</td>
<td></td>
</tr>
</tbody>
</table>

WTM_N39B  INTERVIEWER:  Enter unit of time.

1  Days
2  Weeks
3  Months

(DK, RF are not allowed)

WTM_Q40  In your view, \(^{\text{DT\_WAITTIME3}}\):

INTERVIEWER:  Read categories to respondent.  It is important to make a distinction between "No view" and "Don't Know".

1  ...acceptable?  (Go to WTM_Q42)
2  ...not acceptable?
3  No view
   DK, RF

WTM_Q41A  In this particular case, what do you think is an acceptable waiting time?

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<tbody>
<tr>
<td>(MIN: 1) (MAX: 365)</td>
<td></td>
</tr>
<tr>
<td>DK, RF (Go to WTM_Q42)</td>
<td></td>
</tr>
</tbody>
</table>
WTM_N41B

INTERVIEWER: Enter unit of time.

WTM_41B

1  Days
2  Weeks
3  Months

(DK, RF are not allowed)

WTM_E41B

An unusual number has been entered. Please confirm.

Note:

Trigger soft edit if (WTM_Q41A > 31 and WTM_N41B = 1) or (WTM_Q41A > 12 and WTM_N41B = 2) or (WTM_Q41A > 18 and WTM_N41B=3).

WTM_Q42

Was your test cancelled or postponed at any time?

WTM_42

1  Yes
2  No  (Go to WTM_Q44)
DK, RF (Go to WTM_Q44)

WTM_Q43

Was it cancelled or postponed by:

WTM_43

INTERVIEWER: Read categories to respondent.

1  ...yourself?
2  ...the specialist?
3  ...the hospital?
4  ...the clinic?
5  Other - Specify  (Go to WTM_S43)
DK, RF (Go to WTM_S43)

Go to WTM_Q44

WTM_S43

INTERVIEWER: Specify.

____________________________________________________
(80 spaces)
DK, RF

WTM_Q44

Do you think that your health, or other aspects of your life, have been affected in any way due to waiting for this test?

WTM_44

1  Yes
2  No  (Go to WTM_END)
DK, RF (Go to WTM_END)
WTM_Q45  How was your life affected as a result of waiting for this test?

INTERVIEWER: Mark all that apply.

WTM_Q45A  01  Worry, anxiety, stress
WTM_Q45B  02  Worry or stress for family or friends
WTM_Q45C  03  Pain
WTM_Q45D  04  Problems with activities of daily living (e.g., dressing, driving)
WTM_Q45E  05  Loss of work
WTM_Q45F  06  Loss of income
WTM_Q45G  07  Increased dependence on relatives/friends
WTM_Q45H  08  Increased use of over-the-counter drugs
WTM_Q45I  09  Overall health deteriorated, condition got worse
WTM_Q45J  10  Health problem improved
WTM_Q45K  11  Personal relationships suffered
WTM_Q45L  12  Other - Specify  (Go to WTM_S45)
               DK, RF

Go to WTM_END

WTM_S45  INTERVIEWER: Specify.

(80 spaces)
DK, RF

WTM_END
Labour force (LBS)

LF2_BEG  Core content

LF2_C1A  If (do LF2 block = 1), go to LF2_C1B. Otherwise, go to LF2_END.

LF2_C1B  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, RF (Go to LF2_END)

LF2_E1  A response inconsistent with a response to a previous question has been entered. Please confirm.

Note:  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  Last week, did ^YOU2 have a job or business from which ^YOU1 ^WERE absent?

1  Yes
2  No (Go to LF2_Q4)
   DK, RF (Go to LF2_END)
Did ^YOU1 have more than one job or business last week?

1 Yes
2 No
DK, RF

Go to LF2_D5

In the past 4 weeks, did ^YOU2 do anything to find work?

1 Yes
2 No
DK, RF

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?

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)
DK, RF

What is the name of ^YOUR1 business?

(50 spaces)

DK, RF

Go to LF2_Q4

For whom ^DOVERB ^YOU1 currently work? (For example: name of business, government department or agency, or person)

(50 spaces)

DK, RF
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, RF

What kind of work *ARE YOU1 doing? (For example: babysitting in own home, factory worker, forestry technician)

*(50 spaces)*

DK, RF

Note: Use trigram search, source file is PrepSOC.tdf

SIC_CODE (4 bytes)

Note: Store SOC Code associated with LF2_Q35

If LF2_D35 = 1 or LF2_D35 = 2 (OtherSpec), go to LF2_S35. Otherwise, go to LF2_Q36.

INTERVIEWER: Specify.

*(50 spaces)*

DK, RF

What are *YOUR1 most important activities or duties? (For example: caring for children, stamp press machine operator, forest examiner)

*(50 spaces)*

DK, RF

About how many hours a week *DOVERB YOU1 usually work at *YOUR1 job or business? If *YOU2 usually work^S extra hours, paid or unpaid, please include these hours.

|   | Hours
|---|---
| MIN: 1 | MAX: 168; warning after 84 |

DK, RF
If LF2_Q3 = 1, go to LF2_Q7.
Otherwise, go to LF2_END.

You indicated that YOU2 HAVE more than one job.

About how many hours a week DOVERB YOU1 usually work at YOUR1 other job(s)? If YOU2 usually works extra hours, paid or unpaid, please include these hours.

INTERVIEWER: Minimum is 1; maximum is [168 - LF2_Q5].

Note:
If LF2_Q5 = 168, then maximum = 1.
If LF2_Q5 = DK or RF, then maximum = 168.
Loss of Productivity (LOP)

LOP_BEG  Theme content

External variables required:

PROXMODE: proxy identifier, from the GR block.
DOLOP: do block flag, from the sample file.
GEN_Q08: worked at a job or business in the past 12 month
Age of respondent

LOP_C010   If (do LOP = 1), go to LOP_C011.
            Otherwise, go to LOP_END.

LOP_C011   If proxy interview, go to LOP_END.
            Otherwise, go to LOP_C011A.

LOP_C011A  If age < 15 or age > 75, go to LOP_END.
            Otherwise, go to LOP_C012.

LOP_C012   If GEN_Q08 = 2 (did not work in the past 12 months), go to LOP_Q020.
            Otherwise, go to LOP_Q015.

LOP_Q015   Did you work at a job or a business at any time in the past three months?

LOP_015    INTERVIEWER: Include only paid job or business.

1  Yes     (Go to LOP_R030)
2  No
   DK, RF  (Go to LOP_END)
What is the main reason that you have not worked at a job or business in the past three months?

**INTERVIEWER:** If respondent wants to report more that one reason, ask for the main one.

01 Chronic physical or mental health condition diagnosed by a health professional
02 Own injury such as broken bone, bad cut, burn or sprain
03 Own infectious disease such as a cold, flu or stomach flu
04 Other reason related to physical or mental health
05 Caring for own children
06 Caring for elderly relative(s)
07 Maternity, paternity or parental leave
08 Education, training or school
09 Temporary lay-off
10 Strike or lockout
11 Retired
12 Other
 DK, RF

If LOP_Q020 = 01, go to LOP_Q050. Otherwise, go to LOP_END.

The next questions are about absence from work because of your OWN health. Please include consultations with health professionals, but exclude absences because of the health of another person.

**INTERVIEWER:** Press <1> to continue.

In the past three months, that is from [date three months ago] to yesterday, have you missed any days at work because of a chronic health condition?

By chronic condition, we mean a long-term physical or mental condition that is expected to last or have already lasted 6 months or more and that has been diagnosed by a health professional.

1 Yes
2 No (Go to LOP_Q060)
 DK, RF  (Go to LOP_Q060)
How many days of work have you missed because of a chronic condition?

INTERVIEWER: Don't enter days for which time has been made up. Enter 1 day if respondent reports less than one day.

\[\begin{array}{c}
\text{MIN: 1} \\
\text{MAX: 90}
\end{array}\]

Which chronic condition is this?

INTERVIEWER: If the respondent wants to report more than one condition, probe for the main reason or the one that has required the highest number of days of absence.

01 Arthritis (such as rheumatoid arthritis, osteoarthritis, lupus or gout)
02 Osteoporosis
03 Cardiovascular disease (including stroke and hypertension)
04 Kidney disease
05 Asthma
06 Chronic bronchitis, emphysema or chronic obstructive pulmonary disease (COPD)
07 Diabetes
08 Migraine
09 Back problems
10 Cancer
11 Mental illnesses (such as depression bipolar disorder, mania or schizophrenia)
12 Neurological diseases (such as alzheimer, dementia, parkinson's disease, multiple sclerosis, spina bifida)
13 Digestive diseases (such as celiac disease, irritable bowel syndrome, stomach ulcers)
14 Fibromyalgia, chronic fatigue syndrome or multiple chemical sensitivities
15 Other - Specify (Go to LOP_S050)

DK, RF

Specify.

(80 spaces)

DK, RF

If LOP_Q020 = 1, go to LOP_END. Otherwise, go to LOP_Q060.
Canadian Community Health Survey (CCHS)
Annual Component - 2010 Questionnaire

LOP_Q060
In the past three months, have you missed any days at work because of an injury such as a broken bone, a bad cut, a burn or a sprain?

1   Yes (Go to LOP_Q080)
2   No    (Go to LOP_Q080)
DK, RF    (Go to LOP_Q080)

LOP_Q070
How many days of work have you missed (because of an injury)?

INTERVIEWER: Don't enter days for which time has been made up. Enter 1 day if respondent reports less than one day.

|||
(MIN: 1) (MAX: 90)
DK, RF

LOP_Q080
In the past three months, have you missed any days at work because of an infectious disease such as a cold, a stomach flu or a respiratory infection?

1   Yes (Go to LOP_Q090)
2   No    (Go to LOP_Q090)
DK, RF    (Go to LOP_Q090)

LOP_Q081
Which infectious disease was this?

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

|   |   |
1   Cold
2   Flu or influenza
3   Stomach flu
4   Respiratory Infection
5   Other
DK, RF    (Go to LOP_Q090)

Go to LOP_C082

LOP_C082
If LOP_Q081 = 1, go to LOP_Q082.
Otherwise, go to LOP_C083.

LOP_Q082
How many days of work have you missed because of acold?

INTERVIEWER: Symptoms of a cold include a runny nose, congestion and a cough. Don't enter days for which time has been made up.

|||
(MIN: 1) (MAX: 90)
DK, RF

Page 309 of 378
LOP_C083
If LOP_Q081=2, go to LOP_Q083. Otherwise, go to LOP_C084.

LOP_Q083
How many days of work have you missed because of a flu or influenza?

INTERVIEWER: Symptoms of influenza include fever, headache and body aches. Don't enter days for which time has been made up.

   (MIN: 1) (MAX: 90)
   DK, RF

LOP_C084
If LOP_Q081=3, go to LOP_Q084. Otherwise, go to LOP_C085.

LOP_Q084
How many days of work have you missed because of a stomach flu?

INTERVIEWER: Symptoms of stomach flu include nausea, vomiting, stomach cramps and diarrhea. Don't enter days for which time has been made up.

   (MIN: 1) (MAX: 90)
   DK, RF

LOP_C085
If LOP_Q081=4, go to LOP_Q085. Otherwise, go to LOP_C085.

LOP_Q085
How many days of work have you missed because of another respiratory infection such as pneumonia or bronchitis?

INTERVIEWER: Don't enter days for which time has been made up.

   (MIN: 1) (MAX: 90)
   DK, RF

LOP_C086
If LOP_Q081=5, go to LOP_Q086. Otherwise, go to LOP_Q090.
Canadian Community Health Survey (CCHS)  
Annual Component - 2010 Questionnaire

**LOP_Q086**  
How many days of work have you missed because of any other infectious disease?

**INTERVIEWER**: Don't enter days for which time has been made up.

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</table>

(MIN: 1) (MAX: 90)

DK, RF

**LOP_Q090**  
In the past three months, have you been absent from work because of any other reason related to your physical or mental health?

1 Yes (Go to LOP_Q100)
2 No (Go to LOP_END)
DK, RF (Go to LOP_END)

**LOP_Q100**  
How many days of work have you missed because of another reason related to your own physical or mental health?

**INTERVIEWER**: Don't enter days for which time has been made up. Enter 1 day if respondent reports less than one day.

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(MIN: 1) (MAX: 90)

DK, RF

**LOP_END**
Physical activities - Facilities at work (PAF)

PAF_BEG  Optional Content (See Appendix 2)

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, 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, RF  (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?

INTERVIEWER: If respondent says the question does not apply to their work, code as No.

1  Yes
2  No
   DK, RF  (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, RF
(At or near your place of work, do you have access to:)

...a gym or physical fitness facilities?

1 Yes
2 No
DK, RF

(At or near your place of work, do you have access to:)

...organized fitness classes?

1 Yes
2 No
DK, RF

If PAF_Q01 = 1, go to PAF_END. Otherwise, go to PAF_Q06.

(At or near your place of work, do you have access to:)

...any organized recreational sport teams?

1 Yes
2 No
DK, RF

At or near your place of work, do you have access to:

...showers and change rooms?

1 Yes
2 No
DK, RF

(At or near your place of work, do you have access to:)

...programs to improve health, physical fitness or nutrition?

1 Yes
2 No
DK, RF

PAF_END
Socio-demographic characteristics (SDC)

SDC_BEG  Core content

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 YOU born?

SDC_1  
01 Canada (Go to SDC_D4)
02 China
03 France
04 Germany
05 Greece
06 Guyana
07 Hong Kong
08 Hungary
09 India
10 Italy
11 Jamaica
12 Netherlands / Holland
13 Philippines
14 Poland
15 Portugal
16 United Kingdom
17 United States
18 Viet Nam
19 Sri Lanka
20 Other - Specify (Go to SDC_S1)
      DK, RF (Go to SDC_D4)

Go to SDC_Q2

SDC_S1  INTERVIEWER: Specify.

____________________________________________________
(80 spaces)

(80 spaces)

DK, RF
### SDC Q2

**^WERE_C ^YOU1 born a Canadian citizen?**

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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>(Go to SDC_D4)</td>
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<tr>
<td>2</td>
<td>No</td>
<td>(Go to SDC_D4)</td>
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### SDC Q3

**In what year did ^YOU1 first come to Canada to live?**

**INTERVIEWER:** Minimum is ^YEAROFBIRTH; maximum is ^CURRENTYEAR.

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**Note:** Trigger hard edit if SDC_Q3 < ^YEAROFBIRTH or SDC_Q3 > ^CURRENTYEAR.

### SDC D4

(not applicable)
To which ethnic or cultural groups did ^YOUR2 ancestors belong? (For example: French, Scottish, Chinese, East Indian)

INTERVIEWER: Mark all that apply. An ancestor is usually more distant than a grandparent. If "Canadian" is the only response, probe. If the respondent hesitates, do not suggest Canadian. If the respondent answers "Eskimo", enter "20".

SDC_4A 01 Canadian
SDC_4B 02 French
SDC_4C 03 English
SDC_4D 04 German
SDC_4E 05 Scottish
SDC_4F 06 Irish
SDC_4G 07 Italian
SDC_4H 08 Ukrainian
SDC_4I 09 Dutch (Netherlands)
SDC_4J 10 Chinese
SDC_4K 11 Jewish
SDC_4L 12 Polish
SDC_4M 13 Portuguese
SDC_4N 14 South Asian (e.g. East Indian, Pakistani, Sri Lankan)
SDC_4T 15 Norwegian
SDC_4U 16 Welsh
SDC_4V 17 Swedish
SDC_4P 18 North American Indian
SDC_4Q 19 Métis
SDC_4R 20 Inuit
SDC_4S 21 Other - Specify (Go to SDC_S4)

Go to SDC_Q4_1

SDC_S4 INTERVIEWER: Specify.

(80 spaces)

DK, RF

SDC_Q4_1 ARE_C ^YOU1 an Aboriginal person, that is, North American Indian, Métis or Inuit?

SDC_41

1 Yes
2 No (Go to SDC_D4_3)
DK, RF (Go to SDC_Q5)
### SDC_Q4_2

**^ARE_C^YOU1:**

**INTERVIEWER:** Read categories to respondent. Mark all that apply. If respondent answers "Eskimo", enter "3".

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1</td>
<td>... North American Indian?</td>
</tr>
<tr>
<td>2</td>
<td>... Métis?</td>
</tr>
<tr>
<td>3</td>
<td>... Inuit?</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Go to SDC_Q5

### SDC_D4_3

(Not applicable)

### 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.

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<tbody>
<tr>
<td>01</td>
<td>... White?</td>
</tr>
<tr>
<td>02</td>
<td>... Chinese?</td>
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<tr>
<td>03</td>
<td>... South Asian (e.g., East Indian, Pakistani, Sri Lankan)?</td>
</tr>
<tr>
<td>04</td>
<td>... Black?</td>
</tr>
<tr>
<td>05</td>
<td>... Filipino?</td>
</tr>
<tr>
<td>06</td>
<td>... Latin American?</td>
</tr>
<tr>
<td>07</td>
<td>... Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese)?</td>
</tr>
<tr>
<td>08</td>
<td>... Arab?</td>
</tr>
<tr>
<td>09</td>
<td>... West Asian (e.g., Afghan, Iranian)?</td>
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<td>10</td>
<td>... Japanese?</td>
</tr>
<tr>
<td>11</td>
<td>... Korean?</td>
</tr>
<tr>
<td>12</td>
<td>Other - Specify (Go to SDC_S4_3)</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Go to SDC_Q5

### SDC_S4_3

**INTERVIEWER:** Specify.

____________________________
(80 spaces)

DK, RF
SDC_Q5 In what languages can YOU conduct a conversation?

INTERVIEWER: Mark all that apply.

SDC_5A 01 English
SDC_5B 02 French
SDC_5C 03 Arabic
SDC_5D 04 Chinese
SDC_5E 05 Cree
SDC_5F 06 German
SDC_5G 07 Greek
SDC_5H 08 Hungarian
SDC_5I 09 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_5T 19 Dutch
SDC_5U 20 Hindi
SDC_5V 21 Russian
SDC_5W 22 Tamil
SDC_5S 23 Other - Specify (Go to SDC_S5)

Go to SDC_Q5A

SDC_S5 INTERVIEWER: Specify.

(80 spaces)

DK, RF
SDC_Q5A  What language DOVERB YOU1 speak most often at home?

INTERVIEWER: Mark all that apply.

<table>
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<tr>
<th>Code</th>
<th>Language</th>
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<tbody>
<tr>
<td>01</td>
<td>English</td>
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<td>02</td>
<td>French</td>
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<td>03</td>
<td>Arabic</td>
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<td>04</td>
<td>Chinese</td>
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<td>05</td>
<td>Cree</td>
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<td>06</td>
<td>German</td>
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<td>Greek</td>
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<td>08</td>
<td>Hungarian</td>
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<td>09</td>
<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>13</td>
<td>Portuguese</td>
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<td>14</td>
<td>Punjabi</td>
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<td>15</td>
<td>Spanish</td>
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<td>16</td>
<td>Tagalog (Filipino)</td>
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<td>17</td>
<td>Ukrainian</td>
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<td>Russian</td>
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<td>22</td>
<td>Tamil</td>
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<td>23</td>
<td>Other - Specify (Go to SDC_S5A)</td>
</tr>
</tbody>
</table>

Go to SDC_D6

SDC_S5A  INTERVIEWER: Specify.

(80 spaces)

DK, RF

SDC_D6  (not applicable)
**SDC_Q6**

*What is the language that YOU 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.

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<th>Code</th>
<th>Language</th>
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<tbody>
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<td>23</td>
<td>Other - Specify (Go to SDC_S6)</td>
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</tbody>
</table>

Go to SDC_Q7

**SDC_S6**

**INTERVIEWER:** Specify.

(20 spaces)

DK, RF

**SDC_Q7**

*Is the dwelling you live in currently owned by a member of this household?*

**DHH_OWNER**

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<th>Code</th>
<th>Answer</th>
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<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
<td>No</td>
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</table>

DK, RF

**SDC_C7A**

If proxy interview or age < 18 or age > 59, go to SDC_END. Otherwise, go to 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, RF
Person most knowledgeable about household situation (PMK)

PMK_BEG  Core module

External variables required:

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DOPMK: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space

PMK_C010  If DOPMK = 1, go to PMK_C015.
           Otherwise, go to PMK_END.

PMK_C015  If PROXMODE = 1, go to PMK_END.
           Otherwise, go to PMK_C020.

PMK_C020  If HHLD size = 1 (respondent lives alone) or if AGE > 15, go to PMK_END.
           Otherwise, go to PMK_R020.

PMK_R020  For the last few questions, I would like to speak with someone who would be best able to answer questions related to your household such as household income.

          INTERVIEWER: Press <1> to continue.
Who would this person be?

INTERVIEWER: Select most knowledgeable person from the household roster. Allow the respondent to say myself.

01 MEMBER1
02 MEMBER2
03 MEMBER3
04 MEMBER4
05 MEMBER5
06 MEMBER6
07 MEMBER7
08 MEMBER8
09 MEMBER9
10 MEMBER10
11 MEMBER11
12 MEMBER12
13 MEMBER13
14 MEMBER14
15 MEMBER15
16 MEMBER16
17 MEMBER17
18 MEMBER18
19 MEMBER19
20 MEMBER20

RF  (Go to PMK_R040)
DK  (Go to PMK_R040)

Note: Programmer: Display selected respondent as Member 1 and the rest of household members in the same order as listed in the household roster. Display Name, Age and Sex. Sets member selected name as "Person most knowledgeable".

An invalid answer has been selected. Please return and correct.

Note: Trigger hard edit if a blank answer is selected.

If PMK_Q020 is the respondent then PMKFLAG (Person most knowledgeable) = 2. Else, PMKFLAG = 1.

If PMKFLAG=2, go to PMK_D030C.
Otherwise, go to PMK_D030B.
PMK_D030B

If PMK_Q020 = 1, MEMBERNAME = "MEMBER1".
If PMK_Q020 = 2, MEMBERNAME = "MEMBER2".
If PMK_Q020 = 3, MEMBERNAME = "MEMBER3".
If PMK_Q020 = 4, MEMBERNAME = "MEMBER4".
If PMK_Q020 = 5, MEMBERNAME = "MEMBER5".
If PMK_Q020 = 6, MEMBERNAME = "MEMBER6".
If PMK_Q020 = 7, MEMBERNAME = "MEMBER7".
If PMK_Q020 = 8, MEMBERNAME = "MEMBER8".
If PMK_Q020 = 9, MEMBERNAME = "MEMBER9".
If PMK_Q020 = 10, MEMBERNAME = "MEMBER10".
If PMK_Q020 = 11, MEMBERNAME = "MEMBER11".
If PMK_Q020 = 12, MEMBERNAME = "MEMBER12".
If PMK_Q020 = 13, MEMBERNAME = "MEMBER13".
If PMK_Q020 = 14, MEMBERNAME = "MEMBER14".
If PMK_Q020 = 15, MEMBERNAME = "MEMBER15".
If PMK_Q020 = 16, MEMBERNAME = "MEMBER16".
If PMK_Q020 = 17, MEMBERNAME = "MEMBER17".
If PMK_Q020 = 18, MEMBERNAME = "MEMBER18".
If PMK_Q020 = 19, MEMBERNAME = "MEMBER19".
If PMK_Q020 = 20, MEMBERNAME = "MEMBER20".

PMK_Q030B

Is ^MEMBERNAME available?

1 Yes
2 No
3 Person most knowledgeable about household refuses to participate.

(DK, RF are not allowed)
Go to PMK_D030C

PMK_D030C

PMKFLAG=1 and PMK_Q030B=1 then PMKProxy = 1
Otherwise, PMKProxy = 2

PMK_C040

If PMK_Q030B=1, go to PMK_R050.
Otherwise, go to PMK_C045.

PMK_C045

If PMKFLAG=2 or PMK_Q030B=3, go to PMK_R040.
Otherwise, go to PMK_R045.

PMK_R040

This completes your portion of the interview. On behalf of Statistics Canada, I would like to thank you very much for your time.

INTERVIEWER: Press <1> to continue.

Go to PMK_END
PMK_R045  This completes your portion of the interview. On behalf of Statistics Canada, I would like to thank you very much for your time. I would now like to try and find the best time to speak with ^MEMBERNAME.

INTERVIEWER: Press <1> to continue.

Go to PMK_END

PMK_R050  This completes your portion of the interview. On behalf of Statistics Canada, I would like to thank you very much for your time. I would now like to speak with ^MEMERNAME.

INTERVIEWER: You should continue with the most knowledgeable person about household. Press Enter to continue.

PMK_R060  Hello, My name is ... I've just completed the main portion of the interview with <Respondent's name>. At this point I need to finish the interview with a few general questions on your household's situation. <Respondent's name> said you would be the best person to answer these types of questions.

INTERVIEWER: Press <1> to continue.

PMK_END
Home safety (HMS)

HMS_BEG  Optional Content (See Appendix 2)

HMS_C1A  If (do HMS block = 2), go to HMS_END.
Otherwise, go to HMS_C1B.

HMS_C1B  If PMKProxy = 2, 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?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
<td>(Go to HMS_Q5)</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td>(Go to HMS_END)</td>
</tr>
</tbody>
</table>

HMS_Q2  Are there smoke detectors installed on every level of your home, including the basement?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td></td>
</tr>
</tbody>
</table>

HMS_Q3  Are the smoke detectors tested each month?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td></td>
</tr>
</tbody>
</table>

HMS_Q4  How often are the batteries changed in your smoke detectors?

INTERVIEWER:  Read categories to respondent.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>At least every 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>At least every year</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>As needed when the low battery warning chirps</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Never</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Not applicable (Hard wired)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
<td></td>
</tr>
<tr>
<td>HMS_Q5</td>
<td>Is there an escape plan for getting out of your home in case of a fire?</td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>--------------------------------------------------------------------------------</td>
<td></td>
</tr>
</tbody>
</table>
| HMS_5  | 1  Yes  
|        | 2  No   (Go to HMS_END)  
|        | DK, RF (Go to HMS_END) |

| HMS_C6 | If household size > 1, go to HMS_Q6. Otherwise, go to HMS_END. |

<table>
<thead>
<tr>
<th>HMS_Q6</th>
<th>Have the members of your household ever discussed this plan?</th>
</tr>
</thead>
</table>
| HMS_6  | 1  Yes  
|        | 2  No  
|        | DK, RF |

HMS_END
Insurance coverage (INS)

INS_BEG Optional Content (See Appendix 2)

INS_C1A If (do INS block = 1), go to INS_C1B. Otherwise, go to INS_END.

INS_C1B If PMKProxy=2, go to INS_END. Otherwise, go to INS_R1.

INS_R1 Now, turning to ^YOUR2 insurance coverage. Please include any private, government or employer-paid plans.

INTERVIEWER: Press <Enter> to continue.

INS_D1 (not applicable)

INS_Q1 ^DOVERB_C ^YOU2 have insurance that covers all or part of the cost of ^YOUR1 prescription medications?

1 Yes (Go to INS_C2)
2 No (Go to INS_C2)
   DK (Go to INS_C2)
   RF (Go to INS_END)

INS_Q1A Is it:

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

1 ...government-sponsored plan?
2 ...an employer-sponsored plan?
3 ...a private plan?

INS_C2 If (do OH2 block = 1) and not a proxy interview, go to INS_Q3. Otherwise, go to INS_Q2.
INS_Q2

(\text{^DOVERB_C ^YOU2 have insurance that covers all or part of:})

INS_2

...\text{^YOUR1 dental expenses}?

1 Yes
2 No \quad \text{(Go to INS_Q3)}

\text{DK, RF \quad (Go to INS_Q3)}

INS_Q2A

\textbf{Is it:}

\textbf{INTERVIEWER:} \text{Read categories to respondent. Mark all that apply.}

INS_2A
1 \quad \text{...a government-sponsored plan?}

INS_2B
2 \quad \text{...an employer-sponsored plan?}

INS_2C
3 \quad \text{...a private plan?}

\text{DK, RF}

INS_Q3

(\text{^DOVERB_C ^YOU2 have insurance that covers all or part of:})

INS_3

...the costs of eye glasses or contact lenses?

1 Yes
2 No \quad \text{(Go to INS_Q4)}

\text{DK, RF \quad (Go to INS_Q4)}

INS_Q3A

\textbf{Is it:}

\textbf{INTERVIEWER:} \text{Read categories to respondent. Mark all that apply.}

INS_3A
1 \quad \text{...a government-sponsored plan?}

INS_3B
2 \quad \text{...an employer-sponsored plan?}

INS_3C
3 \quad \text{...a private plan?}

\text{DK, RF}

INS_Q4

(\text{^DOVERB_C ^YOU2 have insurance that covers all or part of:})

INS_4

...hospital charges for a private or semi-private room?

1 Yes
2 No \quad \text{(Go to INS_END)}

\text{DK, RF \quad (Go to INS_END)}
INS_Q4A  Is it:

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>INS_4A</td>
<td>1</td>
<td>...a government-sponsored plan?</td>
</tr>
<tr>
<td>INS_4B</td>
<td>2</td>
<td>...an employer-sponsored plan?</td>
</tr>
<tr>
<td>INS_4C</td>
<td>3</td>
<td>...a private plan?</td>
</tr>
</tbody>
</table>

DK, RF

INS_END
Education (EDU)

EDU_BEG
Core content

EDU_C01A
If (do EDU block = 1), go to EDU1_C01B. Otherwise, go to EDU_END.

EDU_C01B
If PMKProxy =2, go to EDU_END. Otherwise, go to EDU_C01C.

EDU_C01C
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
If there is at least one household member who is >= 14 years of age other than the selected respondent, go to EDU_R07A. Otherwise, go to EDU_END.

EDU_R07A
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.
Food security (FSC)

FSC_BEG Optional Content (See Appendix 2)

FSC_C01A If (do FSC block = 1), go to FSC_C01AB.
Otherwise, go to FSC_END.

FSC_C01AB If PMKProxy = 2, go to FSC_END.
Otherwise, go to FSC_D010.

FSC_D010 If HhldSize = 1, ^DT_YouAndOthers = "you".
If HhldSize = 1, ^DT_YouAndOthers_C = "You".
If HhldSize ne 1, ^DT_YouAndOthers = "you and other household members".
If HhldSize ne 1, ^DT_YouAndOthers_C = "You and other household members".
If OlderKids + YoungKids = 1, ^DT_ChildFName = "^ChildFName".
If OlderKids + YoungKids = 1, ^DT_ChildWas = "^ChildFName + was".
If OlderKids + YoungKids = 1, ^DT_AnyChild = "^ChildFName".
If OlderKids + YoungKids = 1, ^DT_AnyChildren = "^ChildFName + 's".
If OlderKids + YoungKids = 1, ^DT_WasAnyChild = "was + ^ChildFName".
If OlderKids + YoungKids ne 1, ^DT_ChildFName = "the children".
If OlderKids + YoungKids ne 1, ^DT_ChildWas = "The children were".
If OlderKids + YoungKids ne 1, ^DT_AnyChild = "any of the children".
If OlderKids + YoungKids ne 1, ^DT_AnyChildren = "any of the children’s".
If OlderKids + YoungKids ne 1, ^DT_WasAnyChild = " were any of the children".
If (Adults + YoungAdults) = 1, ^DT_YouOtherAdults = "you".
If (Adults + YoungAdults) = 1, ^DT_YouOtherAdults_C = "You".
If (Adults + YoungAdults) ne 1, ^DT_YouOtherAdults = "you or other adults in your household".
If (Adults + YoungAdults) ne 1, ^DT_YouOtherAdults_C = "You or other adults in your household"

FSC_R010 The following questions are about the food situation for your household in the past 12 months.

INTERVIEWER: Press <Enter> to continue.
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. ^DT_YouAndOthers_C always had enough of the kinds of food you wanted to eat.
2. ^DT_YouAndOthers_C had enough to eat, but not always the kinds of food you wanted.
3. Sometimes ^DT_YouAndOthers did not have enough to eat.
4. Often ^DT_YouAndOthers didn’t have enough to eat.

DK, RF (Go to FSC_END)

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 ^DT_YouAndOthers in the past 12 months.

INTERVIEWER: Press <Enter> to continue.

The first statement is: ...^DT_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, RF

The food that ^DT_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, RF

^DT_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, RF

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

^DT_YouOtherAdults_C relied on only a few kinds of low-cost food to feed ^DT_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, RF

Note: If (OlderKids + YoungKids) = 0 and some members have age = blank then FSC_Q050 = Valid Skip.

FSC_Q060

^DT_YouOtherAdults_C couldn't feed ^DT_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, RF

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.

FSC_Q070

^DT_ChildWas not eating enough because ^DT_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, RF

FSC_R080

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.
FSC_Q080  In the past 12 months, since last [current month] did ^DT_YouOtherAdults ever cut the size of your meals or skip meals because there wasn’t enough money for food?

1  Yes
2  No  (Go to FSC_Q090)
    DK, RF  (Go to FSC_Q090)

FSC_Q081  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, RF

FSC_Q090  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, RF

FSC_Q100  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, RF

FSC_Q110  In the past 12 months, did you ^Personally lose weight because you didn’t have enough money for food?

1  Yes
2  No
    DK, RF

FSC_C120  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 ^DT_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, RF  (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, RF

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 ^DT_YouOtherAdults ever cut the size of ^DT_AnyChilds meals because there wasn't enough money for food?
---|---
1 | Yes
2 | No
DK, RF

FSC_Q140 | In the past 12 months, did ^DT_AnyChild ever skip meals because there wasn't enough money for food?
---|---
1 | Yes
2 | No
(Go to FSC_Q150)
DK, RF
(No change)

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, RF

FSC_Q150 | In the past 12 months, ^DT_WasAnyChild ever hungry but you just couldn't afford more food?
---|---
1 | Yes
2 | No
DK, RF
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, RF
Neurological Conditions (NEU)

**NEU_BEG**

Common content

External variables required:

Household size
From roster: MEMBERNAME, Sex and Age

PROXMODE: proxy identifier, from the GR block.
FNAME: first name of respondent from household block.
DONEU: do block flag, from the sample file.

PE_Q01: first name of specific respondent from USU block
PE_Q02: last name of specific respondent from USU block

Screen display:
Display on header bar PE_Q01 and PE_Q02 separated by a space.

**NEU_C01**

If DONEU = 1, go to NEU_C02.
Otherwise, go to NEU_END.

**NEU_C02**

If PMKProxy = 2, go to NEU_END.
Otherwise, go to NEU_D010.

**NEU_D010**

If household size > 1, ^DT_PHRASENEUE = "Now, I'd like you to think about everyone in your household."

Otherwise, ^DT_NOW = "Now,.

**NEU_R010**

^DT_PHRASENEUE.

^DT_NOW I'd like to ask about neurological conditions, which are conditions that affect the brain, spinal cord, nerves or muscles. Please do not include mental health conditions such as depression, anxiety disorder or schizophrenia.

We are interested in conditions which are expected to last or have already lasted six months or more and have been diagnosed by a doctor or other health professional.

**INTERVIEWER**: Press <1> to continue.
NEU_D015  If one person household, DT_YOU = "you".
If one person household, DT_DOES_C = "Do you".
If one person household, DT_DOES = "do you".
If one person household, DT_HAS = "Have you".
If Else, DT_YOU = "you or anyone in your household".
If Else, DT_DOES_C = "Does MEMBERNAME".
If Else, DT_DOES = "does MEMBERNAME".
If Else, DT_HAS = "Has MEMBERNAME".

NEU_C015  If household size = 1, go to NEU_Q020.
Otherwise, go to NEU_Q015.

NEU_Q015  Do ^DT_YOU have migraine headaches?

NEU_015

1  Yes  (Go to NEU_Q020)
2  No  (Go to NEU_Q020)
98 RF  (Go to NEU_END)
99 DK  (Go to NEU_Q020)

NEU_C016  If one person household, go to NEU_Q020.
Otherwise, go to NEU_Q016.
NEU_Q016  Who has this condition?

NEU_016  INTERVIEWER: Mark all that apply.

NEU_016A  01  MEMBER1
NEU_016B  02  MEMBER2
NEU_016C  03  MEMBER3
NEU_016D  04  MEMBER4
NEU_016E  05  MEMBER5
NEU_016F  06  MEMBER6
NEU_016G  07  MEMBER7
NEU_016H  08  MEMBER8
NEU_016I  09  MEMBER9
NEU_016J  10  MEMBER10
NEU_016K  11  MEMBER11
NEU_016L  12  MEMBER12
NEU_016M  13  MEMBER13
NEU_016N  14  MEMBER14
NEU_016O  15  MEMBER15
NEU_016P  16  MEMBER16
NEU_016Q  17  MEMBER17
NEU_016R  18  MEMBER18
NEU_016S  19  MEMBER19
20  MEMBER20

Note:  Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.

NEU_E016  An invalid answer has been selected. Please return and correct.

Note:  If a blank answer is selected, call NEU_E016.

NEU_Q020  Do DT_YOU have multiple sclerosis?

NEU_020  1  Yes  (Go to NEU_Q030)
2  No    (Go to NEU_Q030)
DK, RF  (Go to NEU_Q030)

Note:  In processing, if this is a one-person household and NEU_Q020 = 1, then NEU_Q021A = 1 and NEU_Q021(B - T) = 2.

NEU_C021  If one person household, go to NEU_Q030. Otherwise, go to NEU_Q021.
Who has this condition?

Mark all that apply.

INTERVIEWER: Program displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.

Note: An invalid answer has been selected. Please return and correct.

If a blank answer is selected, call NEU_E021.

Do ^DT_YOU have epilepsy?

1  Yes  
2  No   (Go to NEU_Q040)
      DK, RF (Go to NEU_Q040)

Note: In processing, if this is a one-person household and NEU_Q030 = 1, then NEU_Q031A = 1 and NEU_Q031(B - T) = 2.

If one person household, go to NEU_Q032N. Otherwise, go to NEU_Q031.
**NEU_Q031**  Who has this condition?

**INTERVIEWER**: Mark all that apply.

<table>
<thead>
<tr>
<th>NEU_031A</th>
<th>01</th>
<th>MEMBER1</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEU_031B</td>
<td>02</td>
<td>MEMBER2</td>
</tr>
<tr>
<td>NEU_031C</td>
<td>03</td>
<td>MEMBER3</td>
</tr>
<tr>
<td>NEU_031D</td>
<td>04</td>
<td>MEMBER4</td>
</tr>
<tr>
<td>NEU_031E</td>
<td>05</td>
<td>MEMBER5</td>
</tr>
<tr>
<td>NEU_031F</td>
<td>06</td>
<td>MEMBER6</td>
</tr>
<tr>
<td>NEU_031G</td>
<td>07</td>
<td>MEMBER7</td>
</tr>
<tr>
<td>NEU_031H</td>
<td>08</td>
<td>MEMBER8</td>
</tr>
<tr>
<td>NEU_031I</td>
<td>09</td>
<td>MEMBER9</td>
</tr>
<tr>
<td>NEU_031J</td>
<td>10</td>
<td>MEMBER10</td>
</tr>
<tr>
<td>NEU_031K</td>
<td>11</td>
<td>MEMBER11</td>
</tr>
<tr>
<td>NEU_031L</td>
<td>12</td>
<td>MEMBER12</td>
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<tr>
<td>NEU_031M</td>
<td>13</td>
<td>MEMBER13</td>
</tr>
<tr>
<td>NEU_031N</td>
<td>14</td>
<td>MEMBER14</td>
</tr>
<tr>
<td>NEU_031O</td>
<td>15</td>
<td>MEMBER15</td>
</tr>
<tr>
<td>NEU_031P</td>
<td>16</td>
<td>MEMBER16</td>
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<tr>
<td>NEU_031Q</td>
<td>17</td>
<td>MEMBER17</td>
</tr>
<tr>
<td>NEU_031R</td>
<td>18</td>
<td>MEMBER18</td>
</tr>
<tr>
<td>NEU_031S</td>
<td>19</td>
<td>MEMBER19</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>MEMBER20</td>
</tr>
</tbody>
</table>

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.

For each valid response ask:

**NEU_E031**  An invalid answer has been selected. Please return and correct.

Note: If a blank answer is selected for NEU_E031.

**NEU_C032**  If NEU_Q030 = 1, go to NEU_Q032N. Otherwise, go to NEU_Q033N.

**NEU_Q032N**  ^DT_DOES_C currently take medication for epilepsy?

<table>
<thead>
<tr>
<th>NEU_032N</th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>99</td>
</tr>
</tbody>
</table>

Note: Call NEU_Q032N and NEU_Q033N for each member of the household when NEU_Q030 = 1 (yes)
**NEU_Q033N**

^DT_HAS had a seizure in the past five years?

**NEU_033N**

1 Yes
2 No
99 DK, RF

**NEU_Q040**

Do ^DT_YOU have cerebral palsy?

**NEU_040**

1 Yes
2 No (Go to NEU_Q050)
99 DK, RF (Go to NEU_Q050)

**Note:** In processing, if this is a one-person household and NEU_Q040 = 1, then NEU_Q041A = 1 and NEU_Q041(B - T) = 2.

**NEU_C041**

If one person household, go to NEU_Q050. Otherwise, go to NEU_Q041.

**NEU_Q041**

Who has this condition?

**NEU_041**

INTERVIEWER: Mark all that apply.

- **NEU_041A** 01 MEMBER1
- **NEU_041B** 02 MEMBER2
- **NEU_041C** 03 MEMBER3
- **NEU_041D** 04 MEMBER4
- **NEU_041E** 05 MEMBER5
- **NEU_041F** 06 MEMBER6
- **NEU_041G** 07 MEMBER7
- **NEU_041H** 08 MEMBER8
- **NEU_041I** 09 MEMBER9
- **NEU_041J** 10 MEMBER10
- **NEU_041K** 11 MEMBER11
- **NEU_041L** 12 MEMBER12
- **NEU_041M** 13 MEMBER13
- **NEU_041N** 14 MEMBER14
- **NEU_041O** 15 MEMBER15
- **NEU_041P** 16 MEMBER16
- **NEU_041Q** 17 MEMBER17
- **NEU_041R** 18 MEMBER18
- **NEU_041S** 19 MEMBER19
- **NEU_041T** 20 MEMBER20

**Note:** If a blank answer is selected, call NEU_E041.
**NEU_E041**

An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.

**NEU_Q050**

*(Do ^DT_YOU have) spina bifida?*

**NEU_050**

1. Yes
2. No (Go to NEU_Q060)
   DK, RF (Go to NEU_Q060)

Note: In processing, if this is a one-person household and NEU_Q050 = 1, then NEU_Q051A = 1 and NEU_Q051(B - T) = 2.

**NEU_C051**

If one person household, go to NEU_Q060. Otherwise, go to NEU_Q051.

**NEU_Q051**

*Who has this condition?*

**NEU_051**

INTERVIEWER: Mark all that apply.

| **NEU_051A** | 01 MEMBER1 |
| **NEU_051B** | 02 MEMBER2 |
| **NEU_051C** | 03 MEMBER3 |
| **NEU_051D** | 04 MEMBER4 |
| **NEU_051E** | 05 MEMBER5 |
| **NEU_051F** | 06 MEMBER6 |
| **NEU_051G** | 07 MEMBER7 |
| **NEU_051H** | 08 MEMBER8 |
| **NEU_051I** | 09 MEMBER9 |
| **NEU_051J** | 10 MEMBER10 |
| **NEU_051K** | 11 MEMBER11 |
| **NEU_051L** | 12 MEMBER12 |
| **NEU_051M** | 13 MEMBER13 |
| **NEU_051N** | 14 MEMBER14 |
| **NEU_051O** | 15 MEMBER15 |
| **NEU_051P** | 16 MEMBER16 |
| **NEU_051Q** | 17 MEMBER17 |
| **NEU_051R** | 18 MEMBER18 |
| **NEU_051S** | 19 MEMBER19 |
| 20 MEMBER20 |

Note: If a blank answer is selected, call NEU_E051.

**NEU_E051**

An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
**NEU_Q060**

(Do ^DT_YOU have) hydrocephalus?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>99</td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**Note:** In processing, if this is a one-person household and NEU_Q060 = 1, then NEU_Q061A = 1 and NEU_Q061(B - T) = 2.

**NEU_C061**

If one person household, go to NEU_Q070.
Otherwise, go to NEU_Q061.

**NEU_Q061**

Who has this condition?

**NEU_061**

INTERVIEWER: Mark all that apply.

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<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NEU_061A</td>
<td>01 MEMBER1</td>
</tr>
<tr>
<td>NEU_061B</td>
<td>02 MEMBER2</td>
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<tr>
<td>NEU_061C</td>
<td>03 MEMBER3</td>
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<tr>
<td>NEU_061D</td>
<td>04 MEMBER4</td>
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<tr>
<td>NEU_061E</td>
<td>05 MEMBER5</td>
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<tr>
<td>NEU_061F</td>
<td>06 MEMBER6</td>
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<tr>
<td>NEU_061G</td>
<td>07 MEMBER7</td>
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<td>NEU_061H</td>
<td>08 MEMBER8</td>
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<td>NEU_061I</td>
<td>09 MEMBER9</td>
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<td>NEU_061J</td>
<td>10 MEMBER10</td>
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<td>NEU_061K</td>
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<td>NEU_061L</td>
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<td>NEU_061M</td>
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<td>NEU_061N</td>
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<td>NEU_061O</td>
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<td>NEU_061P</td>
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<td>NEU_061Q</td>
<td>17 MEMBER17</td>
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<tr>
<td>NEU_061R</td>
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<tr>
<td>NEU_061S</td>
<td>19 MEMBER19</td>
</tr>
<tr>
<td></td>
<td>20 MEMBER20</td>
</tr>
</tbody>
</table>

**Note:** If a blank answer is selected, call NEU_E061.

**NEU_E061**

An invalid answer has been selected. Please return and correct.

**Note:** Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
(Do ^DT_YOU have) muscular dystrophy?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>DK, RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>99</td>
</tr>
</tbody>
</table>

Note: In processing, if this is a one-person household and NEU_Q070 = 1, then NEU_Q071A = 1 and NEU_Q071(B - T) = 2.

If one person household, go to NEU_Q080. Otherwise, go to NEU_Q071.

Who has this condition?

INTERVIEWER: Mark all that apply.

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<table>
<thead>
<tr>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NEU_071A</td>
<td>01</td>
<td>MEMBER1</td>
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<tr>
<td>NEU_071B</td>
<td>02</td>
<td>MEMBER2</td>
</tr>
<tr>
<td>NEU_071C</td>
<td>03</td>
<td>MEMBER3</td>
</tr>
<tr>
<td>NEU_071D</td>
<td>04</td>
<td>MEMBER4</td>
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<td>NEU_071E</td>
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<td>NEU_071F</td>
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<td>NEU_071G</td>
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<td>NEU_071H</td>
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<td>NEU_071I</td>
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<td>NEU_071J</td>
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<tr>
<td>NEU_071K</td>
<td>11</td>
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<tr>
<td>NEU_071L</td>
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<td>MEMBER12</td>
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<tr>
<td>NEU_071M</td>
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<td>MEMBER13</td>
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<tr>
<td>NEU_071N</td>
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<td>MEMBER14</td>
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<tr>
<td>NEU_071O</td>
<td>15</td>
<td>MEMBER15</td>
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<tr>
<td>NEU_071P</td>
<td>16</td>
<td>MEMBER16</td>
</tr>
<tr>
<td>NEU_071Q</td>
<td>17</td>
<td>MEMBER17</td>
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<tr>
<td>NEU_071R</td>
<td>18</td>
<td>MEMBER18</td>
</tr>
<tr>
<td>NEU_071S</td>
<td>19</td>
<td>MEMBER19</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>MEMBER20</td>
</tr>
</tbody>
</table>

Note: If a blank answer is selected, call NEU_E071.

An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
**NEU_Q080**  (Do ^DT_YOU have) dystonia?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>99</td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**Note:** In processing, if this is a one-person household and NEU_Q080 = 1, then NEU_Q081A = 1 and NEU_Q081(B - T) = 2.

**NEU_C081**  If one person household, go to NEU_Q090.
Otherwise, go to NEU_Q081.

**NEU_Q081**  Who has this condition?

**NEU_081**  INTERVIEWER: Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>NEU_081A</td>
<td>01 MEMBER1</td>
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<tr>
<td>NEU_081B</td>
<td>02 MEMBER2</td>
</tr>
<tr>
<td>NEU_081C</td>
<td>03 MEMBER3</td>
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<tr>
<td>NEU_081D</td>
<td>04 MEMBER4</td>
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<tr>
<td>NEU_081E</td>
<td>05 MEMBER5</td>
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<tr>
<td>NEU_081F</td>
<td>06 MEMBER6</td>
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<tr>
<td>NEU_081G</td>
<td>07 MEMBER7</td>
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<td>NEU_081H</td>
<td>08 MEMBER8</td>
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<td>NEU_081I</td>
<td>09 MEMBER9</td>
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<tr>
<td>NEU_081J</td>
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<tr>
<td>NEU_081K</td>
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<td>NEU_081L</td>
<td>12 MEMBER12</td>
</tr>
<tr>
<td>NEU_081M</td>
<td>13 MEMBER13</td>
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<tr>
<td>NEU_081N</td>
<td>14 MEMBER14</td>
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<td>NEU_081O</td>
<td>15 MEMBER15</td>
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<tr>
<td>NEU_081P</td>
<td>16 MEMBER16</td>
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<tr>
<td>NEU_081Q</td>
<td>17 MEMBER17</td>
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<tr>
<td>NEU_081R</td>
<td>18 MEMBER18</td>
</tr>
<tr>
<td>NEU_081S</td>
<td>19 MEMBER19</td>
</tr>
<tr>
<td>NEU_081T</td>
<td>20 MEMBER20</td>
</tr>
</tbody>
</table>

**Note:** If a blank answer is selected, call NEU_E081.

**NEU_E081**  An invalid answer has been selected. Please return and correct.

**Note:** Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID
(Do ^DT_YOU have) Tourette’s syndrome?

1  Yes
2  No  (Go to NEU_Q100)
99  DK, RF  (Go to NEU_Q100)

Note: In processing, if this is a one-person household and NEU_Q090 = 1, then NEU_Q091A = 1 and NEU_Q091(B - T) = 2.

If one person household, go to NEU_Q100. Otherwise, go to NEU_Q091.

Who has this condition?

INTERVIEWER: Mark all that apply.

01 MEMBER1
02 MEMBER2
03 MEMBER3
04 MEMBER4
05 MEMBER5
06 MEMBER6
07 MEMBER7
08 MEMBER8
09 MEMBER9
10 MEMBER10
11 MEMBER11
12 MEMBER12
13 MEMBER13
14 MEMBER14
15 MEMBER15
16 MEMBER16
17 MEMBER17
18 MEMBER18
19 MEMBER19
20 MEMBER20

Note: If a blank answer is selected, call NEU_E091.

An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_Q100  (Do ^DT_YOU have) Parkinson’s disease?

NEU_100

1  Yes
2  No         (Go to NEU_Q110)
99  DK, RF      (Go to NEU_Q110)

Note: In processing, if this is a one-person household and NEU_Q100 = 1, then
      NEU_Q101A = 1 and NEU_Q101(B - T) = 2.

NEU_C101 If one person household, go to NEU_Q110.
           Otherwise, go to NEU_Q101.

NEU_Q101 Who has this condition?

NEU_101

INTERVIEWER: Mark all that apply.

NEU_101A  01  MEMBER1
NEU_101B  02  MEMBER2
NEU_101C  03  MEMBER3
NEU_101D  04  MEMBER4
NEU_101E  05  MEMBER5
NEU_101F  06  MEMBER6
NEU_101G  07  MEMBER7
NEU_101H  08  MEMBER8
NEU_101I  09  MEMBER9
NEU_101J  10  MEMBER10
NEU_101K  11  MEMBER11
NEU_101L  12  MEMBER12
NEU_101M  13  MEMBER13
NEU_101N  14  MEMBER14
NEU_101O  15  MEMBER15
NEU_101P  16  MEMBER16
NEU_101Q  17  MEMBER17
NEU_101R  18  MEMBER18
NEU_101S  19  MEMBER19
20  MEMBER20

Note: If a blank answer is selected, call NEU_E101.

NEU_E101 An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from
Household Roster. Show household members in ascending order by personID
(Do DT_YOU have) ALS (Lou Gehrig's disease/ amyotrophic lateral sclerosis)?

1 Yes  
2 No (Go to NEU_Q120) 
99 DK, RF (Go to NEU_Q120)

Note: In processing, if this is a one-person household and NEU_Q110 = 1, then NEU_Q111A = 1 and NEU_Q111(B - T) = 2.

If one person household, go to NEU_Q120. Otherwise, go to NEU_Q111.

Who has this condition?

INTERVIEWER: Mark all that apply.

01 MEMBER1  
02 MEMBER2  
03 MEMBER3  
04 MEMBER4  
05 MEMBER5  
06 MEMBER6  
07 MEMBER7  
08 MEMBER8  
09 MEMBER9  
10 MEMBER10  
11 MEMBER11  
12 MEMBER12  
13 MEMBER13  
14 MEMBER14  
15 MEMBER15  
16 MEMBER16  
17 MEMBER17  
18 MEMBER18  
19 MEMBER19  
20 MEMBER20

Note: If a blank answer is selected, call NEU_E111.

An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_Q120  (Do ^DT YOU have) Huntington’s disease?

NEU_120

1  Yes
2  No  (Go to NEU_C130)
99  DK, RF  (Go to NEU_C130)

Note: In processing, if this is a one-person household and NEU_Q120 = 1, then
NEU_Q121A = 1 and NEU_Q121(B - T) = 2.

NEU_C121  If one person household, go to NEU_Q140.
Otherwise, go to NEU_Q121.

NEU_Q121  Who has this condition?

NEU_121  INTERVIEWER: Mark all that apply.

NEU_121A  01  MEMBER1
NEU_121B  02  MEMBER2
NEU_121C  03  MEMBER3
NEU_121D  04  MEMBER4
NEU_121E  05  MEMBER5
NEU_121F  06  MEMBER6
NEU_121G  07  MEMBER7
NEU_121H  08  MEMBER8
NEU_121I  09  MEMBER9
NEU_121J  10  MEMBER10
NEU_121K  11  MEMBER11
NEU_121L  12  MEMBER12
NEU_121M  13  MEMBER13
NEU_121N  14  MEMBER14
NEU_121O  15  MEMBER15
NEU_121P  16  MEMBER16
NEU_121Q  17  MEMBER17
NEU_121R  18  MEMBER18
NEU_121S  19  MEMBER19
20  MEMBER20

Note: If a blank answer is selected, call NEU_E121.

NEU_E121  An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from
Household Roster. Show household members in ascending order by personID

NEU_C130  If household size = 1, go to NEU_C140.
Otherwise, go to NEU_Q130.
NEU_Q130  Do ^DT_YOU suffer from the effects of a stroke?

NEU_130
1  Yes
2  No      (Go to NEU_Q140)
99  DK, RF  (Go to NEU_Q140)

Note:  In processing, if this is a one-person household and NEU_Q130 = 1, then
NEU_Q131A = 1 and NEU_Q131(B - T) = 2.

NEU_C131  If one person household, go to NEU_Q140.
Otherwise, go to NEU_Q131.

NEU_Q131  Who has this condition?

NEU_131
INTERVIEWER:  Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>NEU_131A</td>
<td>01  MEMBER1</td>
</tr>
<tr>
<td>NEU_131B</td>
<td>02  MEMBER2</td>
</tr>
<tr>
<td>NEU_131C</td>
<td>03  MEMBER3</td>
</tr>
<tr>
<td>NEU_131D</td>
<td>04  MEMBER4</td>
</tr>
<tr>
<td>NEU_131E</td>
<td>05  MEMBER5</td>
</tr>
<tr>
<td>NEU_131F</td>
<td>06  MEMBER6</td>
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<tr>
<td>NEU_131G</td>
<td>07  MEMBER7</td>
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<td>NEU_131H</td>
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<td>NEU_131I</td>
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<td>10  MEMBER10</td>
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</tr>
<tr>
<td>NEU_131S</td>
<td>19  MEMBER19</td>
</tr>
<tr>
<td></td>
<td>20  MEMBER20</td>
</tr>
</tbody>
</table>

Note:  If a blank answer is selected, call NEU_E131.

NEU_E131  An invalid answer has been selected. Please return and correct.

Note:  Programmer displays all household member names, genders, and ages from
Household Roster. Show household members in ascending order by personID.
NEU_Q140  Do ^DT_YOU have a neurological condition caused by a brain injury?

**NEU_140**

1  Yes
2  No        (Go to NEU_Q150)
99  DK, RF   (Go to NEU_Q150)

Note: In processing, if this is a one-person household and NEU_Q140 = 1, then NEU_Q141A = 1 and NEU_Q141(B - T) = 2.

**NEU_C141**

If one person household, go to NEU_Q150.
Otherwise, go to NEU_Q141.

NEU_Q141  Who has this condition?

**NEU_141**

INTERVIEWER: Mark all that apply.

| NEU_141A | 01  | MEMBER1 |
| NEU_141B | 02  | MEMBER2 |
| NEU_141C | 03  | MEMBER3 |
| NEU_141D | 04  | MEMBER4 |
| NEU_141E | 05  | MEMBER5 |
| NEU_141F | 06  | MEMBER6 |
| NEU_141G | 07  | MEMBER7 |
| NEU_141H | 08  | MEMBER8 |
| NEU_141I | 09  | MEMBER9 |
| NEU_141J | 10  | MEMBER10|
| NEU_141K | 11  | MEMBER11|
| NEU_141L | 12  | MEMBER12|
| NEU_141M | 13  | MEMBER13|
| NEU_141N | 14  | MEMBER14|
| NEU_141O | 15  | MEMBER15|
| NEU_141P | 16  | MEMBER16|
| NEU_141Q | 17  | MEMBER17|
| NEU_141R | 18  | MEMBER18|
| NEU_141S | 19  | MEMBER19|
| NEU_141T | 20  | MEMBER20|

Note: If a blank answer is selected, call NEU_E141.

**NEU_E141**

An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_Q150  (Do ^DT_YOU have) a neurological condition caused by a brain tumour?

INTERVIEWER: Include both malignant and benign tumours.

Include tumours that start in the brain and cancer from elsewhere in the body that has spread to the brain.

1  Yes
2  No  (Go to NEU_Q160)
99  DK, RF  (Go to NEU_Q160)

Note: In processing, if this is a one-person household and NEU_Q150 = 1, then NEU_Q151A = 1 and NEU_Q151(B - T) = 2.

NEU_C151 If one person household, go to NEU_Q160. Otherwise, go to NEU_Q151.

NEU_Q151 Who has this condition?

INTERVIEWER: Mark all that apply.

NEU_151A  01  MEMBER1
NEU_151B  02  MEMBER2
NEU_151C  03  MEMBER3
NEU_151D  04  MEMBER4
NEU_151E  05  MEMBER5
NEU_151F  06  MEMBER6
NEU_151G  07  MEMBER7
NEU_151H  08  MEMBER8
NEU_151I  09  MEMBER9
NEU_151J  10  MEMBER10
NEU_151K  11  MEMBER11
NEU_151L  12  MEMBER12
NEU_151M  13  MEMBER13
NEU_151N  14  MEMBER14
NEU_151O  15  MEMBER15
NEU_151P  16  MEMBER16
NEU_151Q  17  MEMBER17
NEU_151R  18  MEMBER18
NEU_151S  19  MEMBER19
20  MEMBER20

Note: If a blank answer is selected, call NEU_E151.

NEU_E151 An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_Q160  (Do ^DT_YOU have) a neurological condition caused by a spinal cord injury?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>99</td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Note: In processing, if this is a one-person household and NEU_Q160 = 1, then NEU_Q161A = 1 and NEU_Q161(B - T) = 2.

NEU_C161 If one person household, go to NEU_Q170. Otherwise, go to NEU_Q161.

NEU_Q161  Who has this condition?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>INTERVIEWER: Mark all that apply.</td>
</tr>
<tr>
<td>NEU_161A</td>
<td>01 MEMBER1</td>
</tr>
<tr>
<td>NEU_161B</td>
<td>02 MEMBER2</td>
</tr>
<tr>
<td>NEU_161C</td>
<td>03 MEMBER3</td>
</tr>
<tr>
<td>NEU_161D</td>
<td>04 MEMBER4</td>
</tr>
<tr>
<td>NEU_161E</td>
<td>05 MEMBER5</td>
</tr>
<tr>
<td>NEU_161F</td>
<td>06 MEMBER6</td>
</tr>
<tr>
<td>NEU_161G</td>
<td>07 MEMBER7</td>
</tr>
<tr>
<td>NEU_161H</td>
<td>08 MEMBER8</td>
</tr>
<tr>
<td>NEU_161I</td>
<td>09 MEMBER9</td>
</tr>
<tr>
<td>NEU_161J</td>
<td>10 MEMBER10</td>
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<tr>
<td>NEU_161K</td>
<td>11 MEMBER11</td>
</tr>
<tr>
<td>NEU_161L</td>
<td>12 MEMBER12</td>
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<tr>
<td>NEU_161M</td>
<td>13 MEMBER13</td>
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<tr>
<td>NEU_161N</td>
<td>14 MEMBER14</td>
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<tr>
<td>NEU_161O</td>
<td>15 MEMBER15</td>
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<tr>
<td>NEU_161P</td>
<td>16 MEMBER16</td>
</tr>
<tr>
<td>NEU_161Q</td>
<td>17 MEMBER17</td>
</tr>
<tr>
<td>NEU_161R</td>
<td>18 MEMBER18</td>
</tr>
<tr>
<td>NEU_161S</td>
<td>19 MEMBER19</td>
</tr>
<tr>
<td></td>
<td>20 MEMBER20</td>
</tr>
</tbody>
</table>

Note: If a blank answer is selected, call NEU_E161.

NEU_E161 An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_Q170 (Do ^DT_YOU have) a neurological condition caused by a spinal cord tumour?

INTERVIEWER: Include both malignant and benign tumours.

Include tumours that start in the spinal cord and cancer from elsewhere in the body that has spread to the spinal cord.

1 Yes
2 No (Go to NEU_C180)
99 DK, RF (Go to NEU_C180)

Note: In processing, if this is a one-person household and NEU_Q170 = 1, then NEU_Q171A = 1 and NEU_Q171(B - T) = 2.

NEU_C171 If one person household, go to NEU_Q190.
Otherwise, go to NEU_Q171.

NEU_Q171 Who has this condition?

INTERVIEWER: Mark all that apply.

NEU_171A 01 MEMBER1
NEU_171B 02 MEMBER2
NEU_171C 03 MEMBER3
NEU_171D 04 MEMBER4
NEU_171E 05 MEMBER5
NEU_171F 06 MEMBER6
NEU_171G 07 MEMBER7
NEU_171H 08 MEMBER8
NEU_171I 09 MEMBER9
NEU_171J 10 MEMBER10
NEU_171K 11 MEMBER11
NEU_171L 12 MEMBER12
NEU_171M 13 MEMBER13
NEU_171N 14 MEMBER14
NEU_171O 15 MEMBER15
NEU_171P 16 MEMBER16
NEU_171Q 17 MEMBER17
NEU_171R 18 MEMBER18
NEU_171S 19 MEMBER19
20 MEMBER20

Note: If a blank answer is selected, call NEU_E171.

NEU_E171 An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_C180  If household size = 1, go to NEU_Q190. Otherwise, go to NEU_Q180.

NEU_Q180 (Do DT YOU have) Alzheimer's Disease or any other dementia?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>99</td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Note: In processing, if this is a one-person household and NEU_Q180 = 1, then NEU_Q181A = 1 and NEU_Q181(B - T) = 2.

NEU_Q181 Who has this condition?

NEU_181 INTERVIEWER: Mark all that apply.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NEU_181A</td>
<td>01 MEMBER1</td>
</tr>
<tr>
<td>NEU_181B</td>
<td>02 MEMBER2</td>
</tr>
<tr>
<td>NEU_181C</td>
<td>03 MEMBER3</td>
</tr>
<tr>
<td>NEU_181D</td>
<td>04 MEMBER4</td>
</tr>
<tr>
<td>NEU_181E</td>
<td>05 MEMBER5</td>
</tr>
<tr>
<td>NEU_181F</td>
<td>06 MEMBER6</td>
</tr>
<tr>
<td>NEU_181G</td>
<td>07 MEMBER7</td>
</tr>
<tr>
<td>NEU_181H</td>
<td>08 MEMBER8</td>
</tr>
<tr>
<td>NEU_181I</td>
<td>09 MEMBER9</td>
</tr>
<tr>
<td>NEU_181J</td>
<td>10 MEMBER10</td>
</tr>
<tr>
<td>NEU_181K</td>
<td>11 MEMBER11</td>
</tr>
<tr>
<td>NEU_181L</td>
<td>12 MEMBER12</td>
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<tr>
<td>NEU_181M</td>
<td>13 MEMBER13</td>
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<tr>
<td>NEU_181N</td>
<td>14 MEMBER14</td>
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<tr>
<td>NEU_181O</td>
<td>15 MEMBER15</td>
</tr>
<tr>
<td>NEU_181P</td>
<td>16 MEMBER16</td>
</tr>
<tr>
<td>NEU_181Q</td>
<td>17 MEMBER17</td>
</tr>
<tr>
<td>NEU_181R</td>
<td>18 MEMBER18</td>
</tr>
<tr>
<td>NEU_181S</td>
<td>19 MEMBER19</td>
</tr>
<tr>
<td>NEU_181T</td>
<td>20 MEMBER20</td>
</tr>
</tbody>
</table>

Note: If a blank answer is selected, call NEU_E181.

NEU_E181 An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
NEU_Q190 | Do ^DT_YOU have any other neurological condition that affects the brain, spinal cord, nerves or muscles that we haven’t asked about and that has been diagnosed by a doctor or other health professional?

1  Yes
2  No (Go to NEU_END)
99  DK, RF (Go to NEU_END)

Note: In processing, if this is a one-person household and NEU_Q190 = 1, then NEU_Q191A = 1 and NEU_Q191(B - T) = 2.

NEU_C191 | If one person household, go to neu_q192. Otherwise, go to NEU_Q191.

NEU_Q191 | Who has this condition?

INTERVIEWER: Mark all that apply.

| NEU_191A | 01  MEMBER1 
| NEU_191B | 02  MEMBER2 
| NEU_191C | 03  MEMBER3 
| NEU_191D | 04  MEMBER4 
| NEU_191E | 05  MEMBER5 
| NEU_191F | 06  MEMBER6 
| NEU_191G | 07  MEMBER7 
| NEU_191H | 08  MEMBER8 
| NEU_191I | 09  MEMBER9 
| NEU_191J | 10  MEMBER10 
| NEU_191K | 11  MEMBER11 
| NEU_191L | 12  MEMBER12 
| NEU_191M | 13  MEMBER13 
| NEU_191N | 14  MEMBER14 
| NEU_191O | 15  MEMBER15 
| NEU_191P | 16  MEMBER16 
| NEU_191Q | 17  MEMBER17 
| NEU_191R | 18  MEMBER18 
| NEU_191S | 19  MEMBER19 
| 20  MEMBER20 
| 99  DK, RF (Go to NEU_END)

Note: If a blank answer is selected, call NEU_E191.

NEU_E191 | An invalid answer has been selected. Please return and correct.

Note: Programmer displays all household member names, genders, and ages from Household Roster. Show household members in ascending order by personID.
Call neu_q192 for each member of the household identified in NEU_Q191.

INTERVIEWER: Specify.

What condition(s) ^DT_DOES have? 

(80 spaces)
DK, RF

NEU_END
**Education of the respondent (EDU1)**

**EDU1_BEG** Core content

**EDU_R01** Next, education.

**EDU_Q01** What is the highest grade of elementary or high school \(^\text{YOU2}\) \(^\text{HAVE}\) ever completed?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grade 8 or lower (Québec: Secondary II or lower)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Grade 9 - 10 (Québec: Secondary III or IV, Newfoundland and Labrador: 1st year of secondary)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Grade 11 - 13 (Québec: Secondary V, Newfoundland and Labrador: 2nd to 4th year of secondary)</td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Note: In processing, if ANC_AGE < 14 (age of respondent), the variable EDU_Q01 is given the value of "1" and the variable EDU_Q03 is given the value of "2".

**EDU_Q02** Did \(^\text{YOU1}\) graduate from high school (secondary school)?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

**EDU_Q03** \(^\text{HAVE_C}\) \(^\text{YOU1}\) received any other education that could be counted towards a degree, certificate or diploma from an educational institution?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

Note: In processing, if ANC_AGE < 14 (age of respondent), the variable EDU_Q01 is given the value of "1" and the variable EDU_Q03 is given the value of "2".

**EDU_Q04** What is the highest degree, certificate or diploma \(^\text{YOU1}\) \(^\text{HAVE}\) obtained?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>No post-secondary degree, certificate or diploma</td>
</tr>
<tr>
<td>2</td>
<td>Trade certificate or diploma from a vocational school or apprenticeship training</td>
</tr>
<tr>
<td>3</td>
<td>Non-university certificate or diploma from a community college, CEGEP, school of nursing, etc.</td>
</tr>
<tr>
<td>4</td>
<td>University certificate below bachelor's level</td>
</tr>
<tr>
<td>5</td>
<td>Bachelor's degree</td>
</tr>
<tr>
<td>6</td>
<td>University degree or certificate above bachelor's degree</td>
</tr>
<tr>
<td></td>
<td>DK, RF</td>
</tr>
</tbody>
</table>

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EDU_Q05  ^ARE_C ^YOU1 currently attending a school, college or university?
SDC_8
  1   Yes
  2   No   (Go to EDU_END)
      DK, RF   (Go to EDU_END)

EDU_Q06  ^ARE_C ^YOU1 enrolled as a full-time student or a part-time student?
SDC_9
  1   Full-time
  2   Part-time
      DK, RF
Education of other household members (EDU2)

EDU2_BEG

Core content

EDU2_D07

If proxymode = NonProxy, YOU7 = "you".
If proxymode = NonProxy, YOU8 = "you".
If proxymode = NonProxy, HAVE9_C = "Have".
If proxymode = NonProxy, HAVE10 = "have".
Otherwise, YOU7 = "FNAME".
Otherwise, YOU8 = "he/she".
Otherwise, HAVE9_C = "Has".
Otherwise, HAVE10 = "has".

EDU_Q07

What is the highest grade of elementary or high school ^YOU2 ever completed?

EDU_1

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, RF (Go to EDU_Q03)

EDU_Q08

Did ^YOU1 graduate from high school (secondary school)?

EDU_2

1. Yes
2. No
   DK, RF

EDU_Q09

^HAVE_C ^YOU1 received any other education that could be counted towards a degree, certificate or diploma from an educational institution?

EDU_3

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

EDU_Q10

What is the highest degree, certificate or diploma ^YOU1 ^HAVE obtained?

EDU_4

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, RF

EDU2_END
Income (INC)

INC_BEG  Core content

INC_C1A  If do INC block = 1, go to INC_C1AB. Otherwise, go to INC_END.

INC_C1AB  If PMKProxy = 2, go to INC_END. Otherwise, go to INC_R1.

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.

INC_1A 01 Wages and salaries
INC_1B 02 Income from self-employment
INC_1C 03 Dividends and interest (e.g., on bonds, savings)
INC_1D 04 Employment insurance
INC_1E 05 Worker's compensation
INC_1F 06 Benefits from Canada or Quebec Pension Plan
INC_1G 07 Job related retirement pensions, superannuation and annuities
INC_1H 08 RRSP/RRIF (Registered Retirement Savings Plan/Registered Retirement Income Fund)
INC_1I 09 Old Age Security and Guaranteed Income Supplement
INC_1J 10 Provincial or municipal social assistance or welfare
INC_1K 11 Child Tax Benefit
INC_1L 12 Child support
INC_1M 13 Alimony
INC_1N 14 Other (e.g., rental income, scholarships)
INC_1O 15 None
   DK, RF  (Go to INC_END)

INC_E1  You cannot select "None" and another category. Please return and correct.

Note: Trigger hard edit if INC_Q1 = 15 and any other response selected in INC_Q1.
INC_E2  Inconsistent answers have been entered. Please confirm.

Note:  Trigger soft edit if (INC_Q1 <> 1 or 2) and (LF2_Q1 = 1 or LF2_Q2 = 1).

INC_C2 If more than one source of income is indicated in INC_Q1, go to INC_Q2. Otherwise, go to INC_Q3.

INC_Q2  What was the main source of household income?

INC_2
01  Wages and salaries
02  Income from self-employment
03  Dividends and interest (e.g., on bonds, savings)
04  Employment insurance
05  Worker’s compensation
06  Benefits from Canada or Quebec Pension Plan
07  Job related retirement pensions, superannuation and annuities
08  RRSP/RRIF (Registered Retirement Savings Plan/Registered Retirement Income Fund)
09  Old Age Security and Guaranteed Income Supplement
10  Provincial or municipal social assistance or welfare
11  Child Tax Benefit
12  Child support
13  Alimony
14  Other (e.g., rental income, scholarships)
15  None
   DK, RF

Note:  At the time of the data processing, if the respondent reported only one source of income in INC_Q1, the variable INC_Q2 will be given its value.

INC_E3 A blank answer item has been selected. Please return and correct.

Note:  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 received by all household members, from all sources, before taxes and deductions, in the past 12 months?

INTERVIEWER: Income can come from various sources such as from work, investments, pensions or government. Examples include Employment Insurance, Social Assistance, Child Tax Benefit and other income such as child support, alimony and rental income.

|   |   |   |   |   |   |   |   |  Income
(MIN: 0) (MAX: 500,000)
DK, RF  (Go to INC_Q5A)

Note:  At the time of the data processing, responses reported in INC_Q3 will also be recoded into the cascade categories of INC_Q5A to INC_Q5C.
INC_E4  An unusual value has been entered. Please confirm.

Note:  Trigger soft edit if INC_Q3 > 150,000.

INC_C3  If INC_Q3 = 0, go to INC_END.
Otherwise, go to INC_C4.

INC_C4  If INC_Q3 > 0 and INC_Q3 <= 500,000, go to INC_C5AA.
Otherwise, go to INC_Q5A.

INC_Q5A  What is your best estimate of the total household income received by all household
members, from all sources, before taxes and deductions, in the past 12 months?
Was it:

INTERVIEWER: Read categories to respondent.

1  ...less than $50,000 (include income loss)?
2  ...$50,000 and more? (Go to INC_Q5C)
   DK, RF (Go to INC_END)

INC_Q5B  Please stop me when I have read the category which applies to YOUR household.

INTERVIEWER: Read categories to respondent.

1  Less than $5,000
2  $5,000 or more but less than $10,000
3  $10,000 or more but less than $15,000
4  $15,000 or more but less than $20,000
5  $20,000 or more but less than $30,000
6  $30,000 or more but less than $40,000
7  $40,000 or more but less than $50,000
   DK, RF

Go to INC_C5AA
**INC_Q5C** Please stop me when I have read the category which applies to ^YOUR1 household.

**INC_5C**

**INTERVIEWER:** Read categories to respondent.

1. $50,000 or more but less than $60,000
2. $60,000 or more but less than $70,000
3. $70,000 or more but less than $80,000
4. $80,000 or more but less than $90,000
5. $90,000 or more but less than $100,000
6. $100,000 or more but less than $150,000
7. $150,000 and over

**INC_C5A** If HHLDsz > 1, go to INC_C5B. Otherwise, go to INC_END.

**INC_C5B** If age of respondent > 15, go to INC_D6. Otherwise, go to INC_END.

**INC_D6** (not applicable)
INC_Q6  Thinking about ^YOUR2 total personal income, from which of the following sources did ^YOU1 receive any income in the past 12 months?

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

INC_6A  01  Wages and salaries
INC_6B  02  Income from self-employment
INC_6C  03  Dividends and interest (e.g., on bonds, savings)
INC_6D  04  Employment insurance
INC_6E  05  Worker’s compensation
INC_6F  06  Benefits from Canada or Quebec Pension Plan
INC_6G  07  Job related retirement pensions, superannuation and annuities
INC_6H  08  RRSP/RRIF (Registered Retirement Savings Plan/Registered Retirement Income Fund)
INC_6I  09  Old Age Security and Guaranteed Income Supplement
INC_6J  10  Provincial or municipal social assistance or welfare
INC_6K  11  Child Tax Benefit
INC_6L  12  Child support
INC_6M  13  Alimony
INC_6N  14  Other (e.g., rental income, scholarships)
INC_6O  15  None
   DK, RF   (Go to INC_END)

INC_E5  A selected source of personal income is not selected as one of the sources of income for all household members. Please return and correct.

Note: Trigger hard edit if any response other than 15 is selected in INC_Q6 and is not selected in INC_Q1.

INC_E6  You cannot select “None” and another category. Please return and correct.

Note: Trigger hard edit if INC_Q6 = 15 (None) and any other response selected in INC_Q6.

INC_C6  If more than one source of income is indicated in INC_Q6, go to INC_Q7. Otherwise, go to INC_D8A.
What was the main source of YOUR1 personal income?

01 Wages and salaries  
02 Income from self-employment  
03 Dividends and interest (e.g., on bonds, savings)  
04 Employment insurance  
05 Worker's compensation  
06 Benefits from Canada or Quebec Pension Plan  
07 Job related retirement pensions, superannuation and annuities  
08 RRSP/RRIF (Registered Retirement Savings Plan/Registered Retirement Income Fund)  
09 Old Age Security and Guaranteed Income Supplement  
10 Provincial or municipal social assistance or welfare  
11 Child Tax Benefit  
12 Child support  
13 Alimony  
14 Other (e.g., rental income, scholarships)  
15 None  
   DK, RF (Go to INC_END)

Note: At the time of the data processing, if the respondent reported only one source of income in INC_Q6, the variable INC_Q7 will be given its value.

A blank answer item has been selected. Please return and correct.

Note: Trigger hard edit if the response in INC_Q7 was not selected in INC_Q6.

/not applicable/ (not applicable)

(Not applicable)

What is your best estimate of YOUR1 total personal income from all sources, before taxes and deductions, in the past 12 months?

| | | | | | | Income  
(MIN: 0) (MAX: 500,000)  
   DK, RF (Go to INC_Q8B)

Note: At the time of the data processing, responses reported in INC_Q8A will also be coded into the cascade categories of INC_Q8B to INC_Q8D.

An unusual value has been entered. Please confirm.

Note: Trigger soft edit if INC_Q8A > $150,000.
INC_C7  If INC_Q8A = 0, go to INC_END.
                            Otherwise, go to INC_C8.

INC_C8  If INC_Q8A > 0 and INC_Q8A <= 500,000, go to INC_END.
                            Otherwise, go to INC_Q8B.

INC_Q8B  What is your best estimate of ^YOUR1 total personal income from all sources,
                before taxes and deductions, in the past 12 months? Was it:

INTERVIEWER:  Read categories to respondent.

1  ...less than $30,000?
2  ...$30,000 or more?  (Go to INC_Q8D)
       DK, RF  (Go to INC_END)

INC_Q8C  Please stop me when I have read the category which applies to ^YOU2.

INTERVIEWER:  Read categories to respondent.

1  Less than $5,000
2  $5,000 or more but less than $10,000
3  $10,000 or more but less than $15,000
4  $15,000 or more but less than $20,000
5  $20,000 or more but less than $25,000
6  $25,000 or more but less than $30,000
      DK, RF

Go to INC_END

INC_Q8D  Please stop me when I have read the category which applies to ^YOU2.

INTERVIEWER:  Read categories to respondent.

1  $30,000 or more but less than $40,000
2  $40,000 or more but less than $50,000
3  $50,000 or more but less than $60,000
4  $60,000 or more but less than $70,000
5  $70,000 or more but less than $80,000
6  $80,000 or more but less than $90,000
7  $90,000 or more but less than $100,000
8  $100,000 and over
      DK, RF

INC_END
Administration information (ADM)

ADM_BEG  Core content

ADM_C01  If (do ADM block = 1), go to ADM_D01A. Otherwise, go to ADM_END.

Note:  Health Number

ADM_C01A  If PMKProxy=2, go to ADM_END. Otherwise, go to ADM_D01A.

ADM_D01A  If province = 60, 61 or 62, ^DT_PROVTERR = "territorial". Otherwise, ^DT_PROVTERR = "provincial".

ADM_D01B  If province = 24, ^DT_STAT = "Statistics Canada, your ^DT_PROVTERR ministry of health and the « Institut de la Statistique du Québec»". Otherwise, ^DT_STAT = "Statistics Canada and your ^DT_PROVTERR ministry of health".

ADM_D01C  (not applicable)

ADM_R01  ^DT_STAT would like your permission to link information collected during this interview. This includes linking ^YOUR2 survey information to ^YOUR1 past and continuing use of health services such as visits to hospitals, clinics and doctor's offices.

INTERVIEWER: Press <Enter> to continue.

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, RF (Go to ADM_C04A)
ADM_D3A
If province = 10, "DT_PROVINCEE = "a Newfoundland and Labrador".
If province = 11, "DT_PROVINCEE = "a Prince Edward Island".
If province = 12, "DT_PROVINCEE = "a Nova Scotia".
If province = 13, "DT_PROVINCEE = "a New Brunswick".
If province = 24, "DT_PROVINCEE = "a Quebec".
If province = 35, "DT_PROVINCEE = "an Ontario".
If province = 46, "DT_PROVINCEE = "a Manitoba".
If province = 47, "DT_PROVINCEE = "a Saskatchewan".
If province = 48, "DT_PROVINCEE = "an Alberta".
If province = 59, "DT_PROVINCEE = "a British Columbia".
If province = 60, "DT_PROVINCEE = "a Yukon".
If province = 61, "DT_PROVINCEE = "a Northwest Territories".
If province = 62, "DT_PROVINCEE = "a Nunavut".

ADM_D3B (not applicable)

ADM_Q03A
Having a provincial or territorial health number will assist us in linking to this other information.

^DOVERB_C ^YOU2 have ^DT_PROVINCEE health number?
1 Yes (Go to HN)
2 No
  DK, RF (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, RF (Go to ADM_C04A)
HN  What is ^YOUR1 health number?

INTERVIEWER: Enter a health number for ^DT_PROVINCEE. Do not insert blanks, hyphens or commas between the numbers.

(12 spaces)
DK, RF

ADM_C04A  If province = 24 (Quebec), go to ADM_R04AC. Otherwise, go to ADM_C04B.

ADM_C04B  If province = 60, 61 or 62 (Yukon, N.W.T. or Nunavut), go to ADM_R04AD. Otherwise, go to ADM_R04AA.

Note:  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_C04B

Note:  Data Sharing - NWT, Yukon, Nunavut
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.

Note: Data Sharing - Quebec

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.

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, RF

Note: Frame Evaluation

If CATI (Casetype = 0) and FREFLAG = 2 (i.e. the frame evaluation questions have not been done for the household), go to FRE_R1.
Otherwise, go to ADM_C09.

And finally, a few questions to evaluate the way households were selected for this survey, and to prevent households from being selected more than once for this survey.

INTERVIEWER: Press <Enter> to continue.
FRE_Q1  Excluding cellular phone numbers and phone numbers used strictly for business purposes, or fax machines, how many telephone numbers are there for your household?

1  1
2  2
3  3 or more
4  None
   DK, RF     (Go to FRE_Q05)

FRE_E1  Please confirm with the respondent that, in order to make a telephone call from his/her home the respondent exclusively uses a cellular telephone or if he/she has to leave his/her home to access a telephone.

Note:      Trigger soft edit if (FRE_Q1 = 4).

FRE_C2  If FRE_Q1 = 4, go to FRE_Q4.
        Otherwise, go to FRE_D2.

FRE_D2  If FRE_Q1 = 1, ^DT_MAIN = "your".
        Otherwise, ^DT_MAIN = "your main".

FRE_Q2  What is ^DT_MAIN phone number, including the area code?

FRE_2  INTERVIEWER:  Do not include cellular phone numbers, or those used strictly for business or fax machines.
       Telephone number: [telnum].

Note:  Telephone Block

Code :    INTERVIEWER: Enter the area code.
          | | | | |
Tel :     INTERVIEWER: Enter the telephone number.
          | | | | | | | | |

FRE_E2  A non-Canadian area code has been entered. Please correct.

Note:      Trigger hard edit if a non-canadian area code is entered.

FRE_C3A  If Code or Tel = DK, RF, go to FRE_Q5.
         Otherwise, go to FRE_C3B.
FRE_C3B If FRE_Q1 = 1 (1 phone), go to FRE_Q5. Otherwise, go to FRE_D3.

FRE_D3 If FRE_Q1 = 2, ^DT_PHONE = “your other phone number”. Otherwise, ^DT_PHONE = “another of your phone numbers”.

FRE_Q3 What is ^DT_PHONE, including the area code?

FRE_3 INTERVIEWER: Do not include cellular phone numbers, or those used strictly for business or fax machines. Telephone number: [telnum].

Note: Telephone Block

Code: INTERVIEWER: Enter the area code.

Tel: INTERVIEWER: Enter the telephone number.

Go to FRE_Q5

FRE_E3 A non-Canadian area code has been entered. Please correct.

Note: Trigger hard edit if a non-canadian area code is entered.

FRE_D4 (not applicable)

FRE_Q4 DOVERB_C YOU2 have a working cellular phone that can place and receive calls?

FRE_4

1. Yes
2. No
DK, RF

Go to ADM_C09
FRE_Q5  Among all of the telephone numbers for your home, excluding cellular phone numbers and those used strictly for business purposes and fax machines, are any of them listed in the paper or internet telephone book?

1  Yes
2  No
   DK, RF

Note:  Administration (Part 1)

ADM_C09  If CATI (Casetype = 1), go to ADM_N10. Otherwise, go to ADM_N09.

ADM_N09  INTERVIEWER: Was this interview conducted on the telephone or in person?

ADM_N09
1  On telephone
2  In person
3  Both
   (DK, RF are not allowed)

ADM_N10  INTERVIEWER: Was the respondent alone when you asked this health questionnaire?

ADM_N10
1  Yes  (Go to ADM_N12)
2  No
   DK, RF  (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, RF
<table>
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<tr>
<th>ADM_N12</th>
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<td>01</td>
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<td>Other - Specify</td>
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<td>(Go to ADM_S12)</td>
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</table>

Go to ADM_END

ADM_S12 | INTERVIEWER: Specify. |  

---

(80 spaces)

| ADM_END | DK, RF |
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)
PFC_BEG

PFC_R01 As part of this study, we may need to get in touch in the future.

INTERVIEWER: Press <1> to continue.

1 Continue

(DK, RF are not allowed)

PFC_END

Administration - Fictitious Name (ADF)

ADF_BEG

ADF_N05 INTERVIEWER: Is this a fictitious name for the respondent?

1 Yes
2 No (Go to CON1_RINT)

(DK, RF are not allowed)

ADF_N06 INTERVIEWER: Remind respondent about the importance of getting correct names. Do you want to make corrections to:

1 ... first name only? (Go to ADF_N08)
2 ... last name only? (Go to ADF_N08)
3 ... both names?
4 ... no corrections? (Go to CON1_RINT)

(DK, RF are not allowed)

ADF_N07 INTERVIEWER: Enter the first name only.

(25 spaces)

(25 spaces)

DK, RF

ADF_C08 If ADF_N06 = 3, go to ADF_N08.

Otherwise, go to CON1_RINT.
INTERVIEWER: Enter the last name only.

DK, RF

Exit Introduction (EI)

Before we finish, I would like to ask you a few other questions.

INTERVIEWER: Press <Enter> to continue.

Permission to share (PS)

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.

Data Sharing - All Provinces (excluding Quebec and the territories)

Go to PS_Q01

Data Sharing - NWT, Yukon, Nunavut

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
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.

Do you agree to share the information provided?

1  Yes
2  No
   DK, RF

Thank you for your time.

INTERVIEWER: Press <Enter> to continue.

(DK, RF are not allowed)
Appendix 1 – Canadian community health survey content (2009-2010)
### Appendix 1 – Canadian community health survey content (2009 - 2010)

**Core Modules (all health regions)**

- Age of respondent (ANC)
- Alcohol use (ALC)
- Chronic conditions (CCC)
- Exposure to second-hand smoke (ETS)
- Fruit and vegetable consumption (FVC)
- Flu shots (FLU)

- General health (GEN)
- Health care utilization (HCU)
- Height and weight – Self-reported (HWT)
- Maternal experiences – Breastfeeding (MEX)
- Pain and discomfort (HUP)
- Physical activities (PAC)
- Restriction of activities (RAC)
- Smoking (SMK)

#### Administration and Socio-demographics

- Administration information (ADM)
- Education (EDU)
- Income (INC)
- Labour force (LF2)
- Person most knowledgeable about the household situation (PMK)
- Socio-demographic characteristics (SDC)

**Two-Year Core Content (all health regions)**

2009-2010

1) **Injuries and Functional Health**

- Activities of daily living (ADL)
- Injuries (INJ)
- Health utility index (HUI)
- Use of protective equipment (UPE)

2) **Sexual Behaviours**

- Sexual behaviours (SXB)
One-Year Core Content (all health regions)

2009

1) Health Services Access Survey\(^i\)
- Access to health care services (ACC)
- Waiting times (WTM)

2010

1) Health care utilization
- Contacts with health professionals (CHP)
- H1N1 Flu shot (H1N)
- Neurological conditions (NEU)
- Unmet health care needs (UCN)

2) Economic Burden
- Loss of productivity (LOP)
- Chronic fatigue syndrome and multiple chemical sensitivities (CC4)
- Fibromyalgia (CC3)

Rapid Response (National Estimates)

2009

- Sleep apnea (SLA) (Jan – Feb 2009)
- Osteoporosis (OST) (Mar – Apr 2009)
- Infertility (IFT) (Sep – Dec 2009)

2010

- Stigma towards depression (STG) (May – Jun 2010)
- Mental health experience (MHE) (May – Jun 2010)

\(^i\) Asked of a sub-sample of respondents. These theme modules were not asked of respondents in the territories.
## Appendix 2 – Optional content selection by health regions (grouped by province) (2010)

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