
Survey on Living with Neurological Conditions in Canada (SLNCC)



FOR INFORMATION ONLY

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Intro proxy interview (XGRN)

XGRN_BEG	Content block External variables required: FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. DOXGRN: do block flag, from the sample file. Screen display: Display on header bar FNAME and LNAME separated by a space
XGRN_C01	If DOXGRN = 1, go to XGRN_N01. Otherwise, go to XGRN_END.
XGRN_N01	<u>INTERVIEWER</u> : Do you want to complete this component by proxy? 1 Yes 2 No (Go to XGRN_END) (DK, RF not allowed)
XGRN_N02	<u>INTERVIEWER</u> : Record the reason why this component is being completed by proxy. Proxy interviews are to occur <u>only</u> 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 not allowed)
XGRN_N03	<u>INTERVIEWER</u> : Enter the condition. <hr/> (80 spaces) (DK, RF not allowed)
XGRN_Q04	Do you and ^FNAME ^LNAME live in the same household? 1 Yes 2 No (DK, RF not allowed)

XGRN_Q05

What is your relationship to ^FNAME ^LNAME?

- 01 Husband/Wife
- 02 Common-law partner
- 03 Father/Mother
- 04 Son/Daughter
- 05 Brother/Sister
- 06 Foster father/mother
- 07 Foster son/daughter
- 08 Grandfather/mother
- 09 Grandson/daughter
- 10 In-law
- 11 Other related
- 12 Unrelated
- DK, RF

XGRN_END

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Survey introduction (XINT)

XINT_BEG	<p>Standard block</p> <p>External variables required:</p> <p>FNAME: first name of specific respondent from sample file. LNAME: last name of specific respondent from sample file. DOXINT: do block flag, from the sample file. RTYPE: type of respondent, from sample file (1 = CCHS respondent). PROXMODE: flag indicating who is responding.</p> <p>Screen display: Display on header bar FNAME and LNAME separated by a space</p>
XINT_C01	<p>If DOXINT = 1, go to XINT_D01. Otherwise, go to XINT_END.</p>
XINT_R01	<p>This survey is conducted under the authority of the statistics Act in collaboration with the Public Health Agency of Canada. The purpose of this survey is to collect information on Canadians with neurological conditions. Data from the survey will be used by health professionals and public health programs, with the aim of improving health outcomes for Canadians with neurological conditions.</p> <p>[You may remember recently completing the Canadian Community Health Survey - this is a follow-up to that survey./^FNAME recently completed the Canadian Community Health Survey - this is a follow-up to that survey./NULL]</p> <p><u>INTERVIEWER</u>: Press <1> to continue.</p>
XINT_R02	<p>Your answers will be kept strictly confidential and used only for statistical purposes. While participation is voluntary, your assistance is essential if the results are to be accurate.</p> <p><u>INTERVIEWER</u>: Press <1> to continue.</p>
XINT_END	

General health (XGEN)

XGEN_BEG

Content block

External variable required:

FNAME: first name of specific respondent from sample file.

LNAME: last name of specific respondent from sample file.

DOXGEN: do block flag, from the sample file.

PROXMODE: proxy identifier.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XGEN_C01

If DOXGEN = 1, go to XGEN_D01.

Otherwise, go to XGEN_END.

XGEN_R01

I would like to start with some general background questions.

INTERVIEWER: Press <1> to continue.

XGEN_Q01

GENX_01

In general, would you say your health is... ?

INTERVIEWER: Read categories to respondent.

1 **Excellent**

2 **Very good**

3 **Good**

4 **Fair**

5 **Poor**

DK, RF

XGEN_Q02

GENX_02

Compared to one year ago, how would you say your health is now? Is it... ?

INTERVIEWER: Read categories to respondent.

1 **Much better now than 1 year ago**

2 **Somewhat better now (than 1 year ago)**

3 **About the same as 1 year ago**

4 **Somewhat worse now (than 1 year ago)**

5 **Much worse now (than 1 year ago)**

DK, RF

XGEN_Q03
GENX_03

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

INTERVIEWER: Read categories to respondent.

- 1 Not at all stressful
 - 2 Not very stressful
 - 3 A bit stressful
 - 4 Quite a bit stressful
 - 5 Extremely stressful
- DK, RF

XGEN_END

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Diagnosis (XDIN)

XDIN_BEG

Content block

External variables required:

FNAME: first name of specific respondent from sample file.

LNAME: last name of specific respondent from sample file.

PROXMODE: proxy identifier.

CURRAGE: current age of respondent, from SRC block.

DOXDIN: do block flag, from the sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XDIN_C01A

If DOXDIN = 1, go to XDIN_R01A.

Otherwise, go to XDIN_END.

XDIN_R01A

Now, I'd like to ask some questions about neurological conditions, which are conditions that affect the brain, spinal cord, nerves or muscles. 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.

XDIN_Q01A
DINX_01A

To begin, do you have migraine headaches that have been diagnosed by a health professional?

INTERVIEWER: If the respondent says they have been diagnosed with migraine headaches, but are not currently experiencing symptoms, classify their response as "Yes".

1 Yes

2 No

DK, RF

(Go to XDIN_Q02A)

(Go to XDIN_Q02A)

XDIN_Q01B
DINX_01B

In the past 12 months:

... did you have a headache where you felt nauseated or sick to your stomach?

1 Yes

2 No

DK, RF

XDIN_Q01C
DINX_01C

In the past 12 months:

... did light bother you when you had a headache (a lot more than when you did not have a headache)?

1 Yes

2 No

DK, RF

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XDIN_Q01D
DINX_01D

(In the past 12 months:)

... did your headache limit your ability to work, study, or do what you needed to do for at least one day?

- 1 Yes
- 2 No
- DK, RF

XDIN_C01E

If (XDIN_Q01B = 1 and (XDIN_Q01C = 1 or XDIN_Q01D = 1)) or (XDIN_Q01C = 1 and XDIN_Q01D = 1), go to XDIN_Q01E. Otherwise, go to XDIN_Q02A.

XDIN_Q01E
DINX_01E

How old were you when you were first diagnosed with migraine headaches?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E01E

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q01E > CURRAGE.

XDIN_Q01F
DINX_01F

How old were you when you first started experiencing symptoms related to your migraine headaches?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to migraine headaches, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to migraine headaches), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

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XDIN_E01F

The age when the respondent first experienced symptoms is invalid.
Please return and correct.

Rule :

Trigger hard edit if XDIN_Q01F > CURRAGE and XDIN_Q001F <> 999.

XDIN_Q01G
DINX_01G

Compared to when you were first diagnosed, how would you say your
migraine headaches are now? Are they... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q02A)
 - 4 **Somewhat worse now** (Go to XDIN_Q02A)
 - 5 **Much worse now** (Go to XDIN_Q02A)
- DK, RF (Go to XDIN_Q02A)

XDIN_Q01H

What are the reasons your migraine headaches are better now?

INTERVIEWER: Mark all that apply.

DINX01HA
DINX01HB
DINX01HC

- 01 Medication
 - 02 Surgery
 - 03 Neurological condition in remission
 - 04 Complementary or alternative medicine treatments
 - 05 Rehabilitation therapy
 - 06 Other medical treatment
 - 07 Coping strategy
 - 08 Other
- DK, RF

DINX01HD

DINX01HE
DINX01HF
DINX01HG
DINX01HH

XDIN_Q02A
DINX_02A

Do you have multiple sclerosis?

INTERVIEWER: If the respondent says they have been diagnosed with multiple sclerosis, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
 - 2 No (Go to XDIN_Q03A)
- DK, RF (Go to XDIN_Q03A)

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XDIN_Q02B
DINX_02B

How old were you when you were first diagnosed with multiple sclerosis?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E02B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q02B > CURRAGE.

XDIN_Q02C
DINX_02C

How old were you when you first started experiencing symptoms related to your multiple sclerosis?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to multiple sclerosis, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to multiple sclerosis), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E02C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q02C > CURRAGE and XDIN_Q02C <> 999.

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XDIN_Q02D

Have you received any of the following treatments for your multiple sclerosis?

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

DINX02DA

01 Medication, including injections, infusions or pills

DINX02DB

02 Venous angioplasty or liberation therapy

DINX02DC

03 Stem cell therapy or bone marrow transplant

DINX02DD

04 Urinary catheterization

DINX02DE

05 Complementary or alternative medicine treatments

DINX02DF

06 Rehabilitation therapy, including physical, occupational, speech or massage therapy

DINX02DG

07 Counselling or psychotherapy

DINX02DH

08 No treatment received for multiple sclerosis

DINX02DI

09 Other
DK, RF

XDIN_E02D

You cannot select "No treatment received for multiple sclerosis" and another category. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q02D = 8 with any other response.

XDIN_Q02E

Compared to when you were first diagnosed, how would you say your multiple sclerosis is now? Is it... ?

DINX_02E

INTERVIEWER: Read categories to respondent.

1 Much better now

2 Somewhat better now

3 About the same

(Go to XDIN_Q03A)

4 Somewhat worse now

(Go to XDIN_Q03A)

5 Much worse now

(Go to XDIN_Q03A)

DK, RF

(Go to XDIN_Q03A)

XDIN_Q02F

What are the reasons your multiple sclerosis is better now?

INTERVIEWER: Mark all that apply.

DINX02FA

01 Medication

DINX02FB

02 Venous angioplasty or liberation therapy

DINX02FC

03 Stem cell therapy or bone marrow transplant

DINX02FD

04 Urinary catheterization

DINX02FE

05 Neurological condition in remission

DINX02FF

06 Complementary or alternative medicine treatments

DINX02FG

07 Rehabilitation therapy

DINX02FH

08 Counselling or psychotherapy

DINX02FI

09 Surgery (excluding venous angioplasty and liberation therapy)

DINX02FJ

10 Other medical treatment

DINX02FK

11 Coping strategy

DINX02FL

12 Other

DK, RF

XDIN_Q03A

Do you have epilepsy?

DINX_03A

INTERVIEWER: If the respondent says they have been diagnosed with epilepsy, but are not currently experiencing symptoms, classify their response as "Yes".

1 Yes

2 No

DK, RF

(Go to XDIN_Q04A)

(Go to XDIN_Q04A)

XDIN_Q03B

Do you currently take medication for epilepsy?

DINX_03B

1 Yes

2 No

DK, RF

XDIN_Q03C

Have you had a seizure in the past five years?

DINX_03C

1 Yes

2 No

DK, RF

XDIN_C03D

If XDIN_Q03B = 1 or XDIN_Q03C = 1, go to XDIN_Q03D.
Otherwise, go to XDIN_Q04A.

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XDIN_Q03D
DINX_03D

How old were you when you were first diagnosed with epilepsy?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E03D

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q03D > CURRAGE.

XDIN_Q03E
DINX_03E

How old were you when you first started experiencing symptoms related to your epilepsy?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to epilepsy, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to epilepsy), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E03E

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q03E > CURRAGE and XDIN_Q03E <> 999.

XDIN_Q03F
DINX_03F

Compared to when you were first diagnosed, how would you say your epilepsy is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q04A)
 - 4 **Somewhat worse now** (Go to XDIN_Q04A)
 - 5 **Much worse now** (Go to XDIN_Q04A)
- DK, RF (Go to XDIN_Q04A)

XDIN_Q03G

What are the reasons your epilepsy is better now?

INTERVIEWER: Mark all that apply.

DINX03GA
DINX03GB
DINX03GC

01 Medication
02 Surgery
03 Neurological condition in remission

DINX03GD

04 Complementary or alternative medicine treatments

DINX03GE
DINX03GF
DINX03GG
DINX03GH

05 Rehabilitation therapy
06 Other medical treatment
07 Coping strategy
08 Other
DK, RF

XDIN_Q04A
DINX_04A

Do you have cerebral palsy?

INTERVIEWER: If the respondent says they have been diagnosed with cerebral palsy, but are not currently experiencing symptoms, classify their response as "Yes".

1 Yes
2 No (Go to XDIN_Q05A)
DK, RF (Go to XDIN_Q05A)

XDIN_Q04B
DINX_04B

How old were you when you were first diagnosed with cerebral palsy?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E04B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q04B > CURRAGE.

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XDIN_Q04C
DINX_04C

How old were you when you first started experiencing symptoms related to your cerebral palsy?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to cerebral palsy, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to cerebral palsy), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E04C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q04C > CURRAGE and XDIN_Q04C <> 999.

XDIN_Q04D
DINX_04D

Compared to when you were first diagnosed, how would you say your cerebral palsy is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q05A)
 - 4 **Somewhat worse now** (Go to XDIN_Q05A)
 - 5 **Much worse now** (Go to XDIN_Q05A)
- DK, RF (Go to XDIN_Q05A)

XDIN_Q04E

What are the reasons your cerebral palsy is better now?

INTERVIEWER: Mark all that apply.

DINX04EA
DINX04EB
DINX04EC

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission
- 04 Complementary or alternative medicine treatments
- 05 Rehabilitation therapy
- 06 Other medical treatment
- 07 Coping strategy
- 08 Other

DINX04ED

DINX04EE
DINX04EF
DINX04EG
DINX04EH

DK, RF

XDIN_Q05A
DINX_05A

Do you have spina bifida?

INTERVIEWER: If the respondent says they have been diagnosed with spina bifida, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
- 2 No (Go to XDIN_Q06A)
- DK, RF (Go to XDIN_Q06A)

XDIN_Q05B
DINX_05B

Compared to when you were first diagnosed, how would you say your spina bifida is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
- 2 **Somewhat better now**
- 3 **About the same** (Go to XDIN_Q06A)
- 4 **Somewhat worse now** (Go to XDIN_Q06A)
- 5 **Much worse now** (Go to XDIN_Q06A)
- DK, RF (Go to XDIN_Q06A)

XDIN_Q05C

What are the reasons your spina bifida is better now?

INTERVIEWER: Mark all that apply.

DINX05CA
DINX05CB
DINX05CC

DINX05CD

DINX05CE
DINX05CF
DINX05CG
DINX05CH

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission
- 04 Complementary or alternative medicine treatments
- 05 Rehabilitation therapy
- 06 Other medical treatment
- 07 Coping strategy
- 08 Other
- DK, RF

XDIN_Q06A
DINX_06A

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

Do you have hydrocephalus?

INTERVIEWER: If the respondent says they have been diagnosed with hydrocephalus, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
- 2 No (Go to XDIN_Q07A)
- DK, RF (Go to XDIN_Q07A)

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XDIN_Q06B
DINX_06B

How old were you when you were first diagnosed with hydrocephalus?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E06B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q06B > CURRAGE.

XDIN_Q06C
DINX_06C

How old were you when you first started experiencing symptoms related to your hydrocephalus?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to hydrocephalus, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to hydrocephalus), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E06C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q06C > CURRAGE and XDIN_Q06C <> 999.

XDIN_Q06D
DINX_06D

Compared to when you were first diagnosed, how would you say your hydrocephalus is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q07A)
 - 4 **Somewhat worse now** (Go to XDIN_Q07A)
 - 5 **Much worse now** (Go to XDIN_Q07A)
- DK, RF (Go to XDIN_Q07A)

XDIN_Q06E

What are the reasons your hydrocephalus is better now?

INTERVIEWER: Mark all that apply.

DINX06EA

01 Medication

DINX06EB

02 Surgery

DINX06EC

03 Neurological condition in remission

DINX06ED

04 Complementary or alternative medicine treatments

DINX06EE

05 Rehabilitation therapy

DINX06EF

06 Other medical treatment

DINX06EG

07 Coping strategy

DINX06EH

08 Other

DK, RF

XDIN_Q07A

Do you have muscular dystrophy?

DINX_07A

INTERVIEWER: If the respondent says they have been diagnosed with muscular dystrophy, but are not currently experiencing symptoms, classify their response as "Yes".

1 Yes

2 No

(Go to XDIN_Q08A)

DK, RF

(Go to XDIN_Q08A)

XDIN_Q07B

How old were you when you were first diagnosed with muscular dystrophy?

DINX_07B

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years

(MIN: 0)

(MAX: 130)

DK, RF

XDIN_E07B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q07B > CURRAGE.

XDIN_Q07C
DINX_07C

How old were you when you first started experiencing symptoms related to your muscular dystrophy?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to muscular dystrophy, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to muscular dystrophy), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E07C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q07C > CURRAGE and XDIN_Q07C <> 999.

XDIN_Q07D
DINX_07D

Compared to when you were first diagnosed, how would you say your muscular dystrophy is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
- 2 **Somewhat better now**
- 3 **About the same** (Go to XDIN_Q08A)
- 4 **Somewhat worse now** (Go to XDIN_Q08A)
- 5 **Much worse now** (Go to XDIN_Q08A)
- DK, RF (Go to XDIN_Q08A)

XDIN_Q07E

What are the reasons your muscular dystrophy is better now?

INTERVIEWER: Mark all that apply.

DINX07EA
DINX07EB
DINX07EC

DINX07ED

DINX07EE
DINX07EF
DINX07EG
DINX07EH

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission
- 04 Complementary or alternative medicine treatments
- 05 Rehabilitation therapy
- 06 Other medical treatment
- 07 Coping strategy
- 08 Other
- DK, RF

XDIN_Q08A
DINX_08A

Do you have dystonia?

INTERVIEWER: If the respondent says they have been diagnosed with dystonia, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
- 2 No (Go to XDIN_Q09A)
- DK, RF (Go to XDIN_Q09A)

XDIN_Q08B
DINX_08B

How old were you when you were first diagnosed with dystonia?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E08B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q08B > CURRAGE.

XDIN_Q08C
DINX_08C

How old were you when you first started experiencing symptoms related to your dystonia?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to dystonia, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to dystonia), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E08C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q08C > CURRAGE and XDIN_Q08C <> 999.

XDIN_Q08D
DINX_08D

Compared to when you were first diagnosed, how would you say your dystonia is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
- 2 **Somewhat better now**
- 3 **About the same** (Go to XDIN_Q09A)
- 4 **Somewhat worse now** (Go to XDIN_Q09A)
- 5 **Much worse now** (Go to XDIN_Q09A)
- DK, RF (Go to XDIN_Q09A)

XDIN_Q08E

What are the reasons your dystonia is better now?

INTERVIEWER: Mark all that apply.

DINX08EA
DINX08EB
DINX08EC

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission
- 04 Complementary or alternative medicine treatments

DINX08ED

- 05 Rehabilitation therapy
- 06 Other medical treatment
- 07 Coping strategy
- 08 Other
- DK, RF

DINX08EE
DINX08EF
DINX08EG
DINX08EH

XDIN_Q09A
DINX_09A

Do you have Tourette's syndrome?

INTERVIEWER: If the respondent says they have been diagnosed with Tourette's syndrome, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
- 2 No (Go to XDIN_Q10A)
- DK, RF (Go to XDIN_Q10A)

XDIN_Q09B
DINX_09B

How old were you when you were first diagnosed with Tourette's syndrome?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XDIN_E09B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q09B > CURRAGE.

XDIN_Q09C
DINX_09C

How old were you when you first started experiencing symptoms related to your Tourette's syndrome?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to Tourette's syndrome, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to Tourette's syndrome), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E09C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q09C > CURRAGE et XDIN_Q09C <> 999.

XDIN_Q09D
DINX_09D

Compared to when you were first diagnosed, how would you say your Tourette's syndrome is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- | | | |
|--------|----------------------------|-------------------|
| 1 | Much better now | |
| 2 | Somewhat better now | |
| 3 | About the same | (Go to XDIN_Q10A) |
| 4 | Somewhat worse now | (Go to XDIN_Q10A) |
| 5 | Much worse now | (Go to XDIN_Q10A) |
| DK, RF | | (Go to XDIN_Q10A) |

XDIN_Q09E

What are the reasons your Tourette's syndrome is better now?

INTERVIEWER: Mark all that apply.

DINX09EA

01 Medication

DINX09EB

02 Surgery

DINX09EC

03 Neurological condition in remission

DINX09ED

04 Complementary or alternative medicine treatments

DINX09EE

05 Rehabilitation therapy

DINX09EF

06 Other medical treatment

DINX09EG

07 Coping strategy

DINX09EH

08 Other

DK, RF

XDIN_Q10A

Do you have Parkinson's disease?

DINX_10A

INTERVIEWER: If the respondent says they have been diagnosed with Parkinson's disease, but are not currently experiencing symptoms, classify their response as "Yes".

1 Yes

2 No

(Go to XDIN_Q11A)

DK, RF

(Go to XDIN_Q11A)

XDIN_Q10B

How old were you when you were first diagnosed with Parkinson's disease?

DINX_10B

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years

(MIN: 0)

(MAX: 130)

DK, RF

XDIN_E10B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q10B > CURRAGE.

XDIN_Q10C
DINX_10C

How old were you when you first started experiencing symptoms related to your Parkinson's disease?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to Parkinson's disease, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to Parkinson's disease), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E10C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q10C > CURRAGE and XDIN_Q10C <> 999.

XDIN_Q10D
DINX_10D

Compared to when you were first diagnosed, how would you say your Parkinson's disease is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q11A)
 - 4 **Somewhat worse now** (Go to XDIN_Q11A)
 - 5 **Much worse now** (Go to XDIN_Q11A)
- DK, RF (Go to XDIN_Q11A)

XDIN_Q10E

What are the reasons your Parkinson's disease is better now?

INTERVIEWER: Mark all that apply.

DINX10EA
DINX10EB
DINX10EC
DINX10ED

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission
- 04 Complementary or alternative medicine treatments
- 05 Rehabilitation therapy
- 06 Other medical treatment
- 07 Coping strategy
- 08 Other

DINX10EE
DINX10EF
DINX10EG
DINX10EH

DK, RF

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XDIN_Q11A
DINX_11A

Do you have ALS (Lou Gehrig's disease/amyotrophic lateral sclerosis)?

INTERVIEWER: If the respondent says they have been diagnosed with ALS, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
- 2 No (Go to XDIN_Q12A)
- DK, RF (Go to XDIN_Q12A)

XDIN_Q11B
DINX_11B

How old were you when you were first diagnosed with ALS (Lou Gehrig's disease/amyotrophic lateral sclerosis)?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E11B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q11B > CURRAGE.

XDIN_Q11C
DINX_11C

How old were you when you first started experiencing symptoms related to your ALS (Lou Gehrig's disease/amyotrophic lateral sclerosis)?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to ALS, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to ALS/Lou Gehrig's disease), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E11C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q11C > CURRAGE and XDIN_Q11C <> 999.

XDIN_Q11D
DINX_11D

Compared to when you were first diagnosed, how would you say your ALS is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
- 2 **Somewhat better now**
- 3 **About the same** (Go to XDIN_Q12A)
- 4 **Somewhat worse now** (Go to XDIN_Q12A)
- 5 **Much worse now** (Go to XDIN_Q12A)
- DK, RF (Go to XDIN_Q12A)

XDIN_Q11E

What are the reasons your ALS is better now?

INTERVIEWER: Mark all that apply.

DINX11EA
DINX11EB
DINX11EC

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission
- 04 Complementary or alternative medicine treatments
- 05 Rehabilitation therapy
- 06 Other medical treatment
- 07 Coping strategy
- 08 Other
- DK, RF

DINX11ED

DINX11EE
DINX11EF
DINX11EG
DINX11EH

XDIN_Q12A
DINX_12A

Do you have Huntington's disease?

INTERVIEWER: If the respondent says they have been diagnosed with Huntington's disease, but are not currently experiencing symptoms, classify their response as "Yes".

- 1 Yes
- 2 No (Go to XDIN_Q13A)
- DK, RF (Go to XDIN_Q13A)

XDIN_Q12B
DINX_12B

How old were you when you were first diagnosed with Huntington's disease?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XDIN_E12B

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q12B > CURRAGE.

XDIN_Q12C
DINX_12C

How old were you when you first started experiencing symptoms related to your Huntington's disease?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to Huntington's disease, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to Huntington's disease), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E12C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q12C > CURRAGE and XDIN_Q12C <> 999.

XDIN_Q12D
DINX_12D

Compared to when you were first diagnosed, how would you say your Huntington's disease is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- | | | |
|--------|----------------------------|-------------------|
| 1 | Much better now | |
| 2 | Somewhat better now | |
| 3 | About the same | (Go to XDIN_Q13A) |
| 4 | Somewhat worse now | (Go to XDIN_Q13A) |
| 5 | Much worse now | (Go to XDIN_Q13A) |
| DK, RF | | (Go to XDIN_Q13A) |

XDIN_Q12E

What are the reasons your Huntington's disease is better now?

INTERVIEWER: Mark all that apply.

DINX12EA

01 Medication

DINX12EB

02 Surgery

DINX12EC

03 Neurological condition in remission

DINX12ED

04 Complementary or alternative medicine treatments

DINX12EE

05 Rehabilitation therapy

DINX12EF

06 Other medical treatment

DINX12EG

07 Coping strategy

DINX12EH

08 Other

DK, RF

XDIN_Q13A

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

DINX_13A

Do you have Alzheimer's disease or any other dementia?

INTERVIEWER: If the respondent says they have been diagnosed with Alzheimer's disease or other dementia, but are not currently experiencing symptoms, classify their response as "Yes".

1 Yes

2 No

(Go to XDIN_Q14A)

DK, RF

(Go to XDIN_Q14A)

XDIN_Q13B

Is this... ?

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

DINX13BA

1 Alzheimer's disease

DINX13BB

2 Other dementia

DK, RF

(Go to XDIN_Q14A)

XDIN_Q13C

How old were you when you were first diagnosed with [Alzheimer's disease/dementia/dementias]?

DINX_13C

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years

(MIN: 0)

(MAX: 130)

DK, RF

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XDIN_E13C

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q13C > CURRAGE.

XDIN_Q13D

DINX_13D

How old were you when you first started experiencing symptoms related to your [Alzheimer's disease/dementia/dementias]?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to [Alzheimer's disease/dementia/dementias], regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to [Alzheimer's disease/dementia/dementias]), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E13D

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q13D > CURRAGE and XDIN_Q13D <> 999.

XDIN_Q13E

DINX_13E

Compared to when you were first diagnosed, how would you say your [Alzheimer's disease/dementia/dementias] [is/is/are] now? [Is it/Is it/Are they]... ?

INTERVIEWER: Read categories to respondent.

- | | | |
|--------|----------------------------|-------------------|
| 1 | Much better now | |
| 2 | Somewhat better now | |
| 3 | About the same | (Go to XDIN_Q14A) |
| 4 | Somewhat worse now | (Go to XDIN_Q14A) |
| 5 | Much worse now | (Go to XDIN_Q14A) |
| DK, RF | | (Go to XDIN_Q14A) |

XDIN_Q13F

What are the reasons your [Alzheimer's disease/dementia/dementias] [is/is/are] better now?

INTERVIEWER: Mark all that apply.

DINX13FA

01 Medication

DINX13FB

02 Surgery

DINX13FC

03 Neurological condition in remission

DINX13FD

04 Complementary or alternative medicine treatments

DINX13FE

05 Rehabilitation therapy

DINX13FF

06 Other medical treatment

DINX13FG

07 Coping strategy

DINX13FH

08 Other

DK, RF

XDIN_Q14A

Do you suffer from the effects of a stroke?

DINX_14A

INTERVIEWER: If the respondent says they have been diagnosed with a stroke, but are not currently experiencing any effects, classify their response as "No".

A stroke is a sudden loss of brain function that occurs when the blood flow supplying oxygen to a part of the brain is interrupted. Damage to the brain caused by a stroke can result in difficulties with movement, vision, speech, language and cognition.

1 Yes (Go to XDIN_Q14C)

2 No

DK

RF (Go to XDIN_Q15A)

XDIN_Q14B

Have you ever had a stroke (that has been diagnosed by a health professional)?

DINX_14B

1 Yes

2 No

DK, RF

Go to XDIN_Q15A

XDIN_Q14C
DINX_14C

How old were you when you first started experiencing these effects?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Enter the age when the respondent first started experiencing effects related to a stroke, regardless of whether they had received a diagnosis at this point from a doctor or other health professional.

If the respondent reports having had more than one stroke, instruct the respondent to refer to the first stroke from which the respondent still suffers effects.

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced effects related to a stroke), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E14C

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q14C > CURRAGE and XDIN_Q14C <> 999.

XDIN_Q14D
DINX_14D

Compared to when you first started experiencing the effects of your stroke, how would you say your condition is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- | | | |
|--------|----------------------------|-------------------|
| 1 | Much better now | |
| 2 | Somewhat better now | |
| 3 | About the same | (Go to XDIN_Q15A) |
| 4 | Somewhat worse now | (Go to XDIN_Q15A) |
| 5 | Much worse now | (Go to XDIN_Q15A) |
| DK, RF | | (Go to XDIN_Q15A) |

XDIN_Q14E

What are the reasons your condition is better now?

INTERVIEWER: Mark all that apply.

DINX14EA

01 Medication

DINX14EB

02 Surgery

DINX14EC

03 Neurological condition in remission

DINX14ED

04 Complementary or alternative medicine treatments

DINX14EE

05 Rehabilitation therapy

DINX14EF

06 Other medical treatment

DINX14EG

07 Coping strategy

DINX14EH

08 Other

DK, RF

XDIN_Q15A

Do you have a neurological condition caused by a brain or spinal cord tumour?

DINX_15A

INTERVIEWER: Include both malignant and benign tumours.

Include tumours that start in the brain or spinal cord and cancer from elsewhere in the body that has spread to the brain or spinal cord.

If the respondent says they have been diagnosed with a brain or spinal cord tumour, but are not currently experiencing any effects, classify their response as "No".

1 Yes

2 No

DK, RF

(Go to XDIN_Q16A)

(Go to XDIN_Q16A)

XDIN_Q15B

Is this a... ?

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

DINX15BA

1 **Brain tumour**

DINX15BB

2 **Spinal cord tumour**

DK, RF

(Go to XDIN_Q16A)

XDIN_Q15C

How old were you when you were first diagnosed with your [brain tumour/spinal cord tumour/brain and spinal cord tumours]?

DINX_15C

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years

(MIN: 0)

(MAX: 130)

DK, RF

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XDIN_E15C

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q15C > CURRAGE.

XDIN_Q15D

DINX_15D

How old were you when you first started experiencing symptoms related to your [brain tumour/spinal cord tumour/brain and spinal cord tumours]?

INTERVIEWER: Maximum is ^CURRAGE.

Enter the age when the respondent first started experiencing symptoms related to a brain or spinal cord tumour, regardless of whether they had received a diagnosis at this point from a doctor or other health professional. Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

If the response is Not Applicable (respondent has never experienced symptoms relating to brain or spinal cord tumour), enter 999.

|_|_|_| Years
(MIN: 0)
(MAX: 999)

DK, RF

XDIN_E15D

The age when the respondent first experienced symptoms is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q15D > CURRAGE and XDIN_Q15D <> 999.

XDIN_Q15E

DINX_15E

Compared to when you were first diagnosed, how would you say your [brain tumour/spinal cord tumour/brain and spinal cord tumours] [is/is/are] now? [Is it/Is it/Are they]... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q16A)
 - 4 **Somewhat worse now** (Go to XDIN_Q16A)
 - 5 **Much worse now** (Go to XDIN_Q16A)
- DK, RF (Go to XDIN_Q16A)

XDIN_Q15F

What are the reasons your [brain tumour/spinal cord tumour/brain and spinal cord tumours] [is/is/are] better now?

INTERVIEWER: Mark all that apply.

DINX15FA

01 Medication

DINX15FB

02 Surgery

DINX15FC

03 Neurological condition in remission

DINX15FD

04 Complementary or alternative medicine treatments

DINX15FE

05 Rehabilitation therapy

DINX15FF

06 Other medical treatment

DINX15FG

07 Coping strategy

DINX15FH

08 Other

DK, RF

XDIN_Q16A

Do you have a neurological condition caused by a spinal cord injury?

DINX_16A

INTERVIEWER: If the respondent says they have been diagnosed with a spinal cord injury, but are not currently experiencing any effects, classify their response as "No".

A spinal cord injury is damage to the spinal cord that results in paralysis, loss of strength, loss of sensation, or difficulty controlling the bladder or bowel. Do not include back pain if this is the only symptom of the spinal cord injury.

A neurological condition is a disorder of the brain, spinal cord, nerves or muscles that can result in symptoms such as paralysis, weakness, poor coordination, loss of sensation, seizures, confusion, pain and altered levels of consciousness.

1 Yes

2 No

DK, RF

(Go to XDIN_Q17A)

(Go to XDIN_Q17A)

XDIN_Q16B

Was the spinal cord injury caused by trauma? A traumatic spinal cord injury is damage to the spinal cord caused by physical impact, for example, a car crash or a fall, that results in paralysis, loss of strength, loss of sensation, or difficulty controlling the bowel or bladder.

DINX_16B

1 Yes

2 No

DK, RF

(Go to XDIN_Q17A)

(Go to XDIN_Q17A)

XDIN_Q16C
DINX_16C

How old were you when you were first diagnosed with a spinal cord injury?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

If the respondent reports having had more than one spinal cord injury, instruct the respondent to refer to the first injury from which the respondent still suffers effects.

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E16C

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q16C > CURRAGE.

XDIN_Q16D
DINX_16D

Compared to when you were first diagnosed, how would you say your spinal cord injury is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_Q17A)
 - 4 **Somewhat worse now** (Go to XDIN_Q17A)
 - 5 **Much worse now** (Go to XDIN_Q17A)
- DK, RF (Go to XDIN_Q17A)

XDIN_Q16E

What are the reasons your spinal cord injury is better now?

INTERVIEWER: Mark all that apply.

DINX16EA
DINX16EB
DINX16EC

DINX16ED

DINX16EE
DINX16EF
DINX16EG
DINX16EH

- 01 Medication
 - 02 Surgery
 - 03 Neurological condition in remission
 - 04 Complementary or alternative medicine treatments
 - 05 Rehabilitation therapy
 - 06 Other medical treatment
 - 07 Coping strategy
 - 08 Other
- DK, RF

XDIN_Q17A
DINX_17A

Remember, we're 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.

Do you have a neurological condition caused by a brain injury?

INTERVIEWER: If the respondent says they have been diagnosed with a brain injury, but are not currently experiencing any effects, classify their response as "No".

A brain injury is damage to the brain that results in difficulties with attention, cognition, language, memory, behaviour or movement.

A neurological condition is a disorder of the brain, spinal cord, nerves or muscles that can result in symptoms such as paralysis, weakness, poor coordination, loss of sensation, seizures, confusion, pain and altered levels of consciousness.

- 1 Yes
- 2 No (Go to XDIN_C18)
- DK, RF (Go to XDIN_C18)

XDIN_C17B

If CONNUM = 0 (for questions 1 to 16 only), go to XDIN_Q17C. Otherwise, go to XDIN_D17B.

XDIN_Q17B
DINX_17B

Was the brain injury related to [the neurological condition/any of the neurological conditions] you have already reported?

INTERVIEWER: If the respondent reports having had more than one brain injury, instruct the respondent to refer to the first injury from which the respondent still suffers effects.

- 1 Yes
- 2 No
- DK, RF

XDIN_Q17C
DINX_17C

Was the brain injury caused by trauma? A traumatic brain injury is damage to the brain caused by physical impact, for example, a hit to the head, a car crash or a fall, that results in difficulties with attention, cognition, language, memory, behaviour or movement.

- 1 Yes
- 2 No (Go to XDIN_C18)
- DK, RF (Go to XDIN_C18)

XDIN_Q17D
DINX_17D

How old were you when you were first diagnosed with a brain injury?

INTERVIEWER: Maximum is ^CURRAGE. If necessary, ask (Do you know the approximate age in years?).

If the respondent reports having had more than one brain injury, instruct the respondent to refer to the first injury from which the respondent still suffers effects.

Encourage the respondent to give their best estimate - try not to accept 'Don't Know' as a response as this is important information. Probe if necessary.

|_|_|_| Years
(MIN: 0)
(MAX: 130)

DK, RF

XDIN_E17D

The age at which the respondent was first diagnosed is invalid. Please return and correct.

Rule :

Trigger hard edit if XDIN_Q17D > CURRAGE.

XDIN_Q17E
DINX_17E

Compared to when you were first diagnosed, how would you say your brain injury is now? Is it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Much better now**
 - 2 **Somewhat better now**
 - 3 **About the same** (Go to XDIN_C18)
 - 4 **Somewhat worse now** (Go to XDIN_C18)
 - 5 **Much worse now** (Go to XDIN_C18)
- DK, RF (Go to XDIN_C18)

XDIN_Q17F

What are the reasons your brain injury is better now?

INTERVIEWER: Mark all that apply.

DINX17FA
DINX17FB
DINX17FC

- 01 Medication
- 02 Surgery
- 03 Neurological condition in remission

DINX17FD

- 04 Complementary or alternative medicine treatments

DINX17FE
DINX17FF
DINX17FG
DINX17FH

- 05 Rehabilitation therapy
 - 06 Other medical treatment
 - 07 Coping strategy
 - 08 Other
- DK, RF

XDIN_C18

If CONNUM = 0, go to XDIN_D18A.
Otherwise, go to XDIN_END.

XDIN_R18

You have said you do not have a neurological condition covered by this survey. Since this survey applies only to people with certain neurological conditions, you are not eligible to participate in the Survey on Living with Neurological Conditions in Canada. Thank you for your time.

INTERVIEWER: Press <1> to continue.

XDIN_END

FOR INFORMATION ONLY

Chronic conditions (XCCN)

XCCN_BEG

Content block

External variables required:

FNAME: first name of respondent from sample file.

LNAME: last name of respondent from sample file.

DOXCCN: do block flag, from the sample file.

SEX: sex of respondent (1=male, 2=female) from sample file.

CURRAGE: current age of respondent, from SRC block.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XCCN_C01

If DOXCCN = 1, go to XCCN_R01.

Otherwise, go to XCCN_END.

XCCN_R01

Now, I'd like to ask about other chronic health conditions which you may have. We are interested in "long-term conditions" which are expected to last or have already lasted six months or more and that have been diagnosed by a health professional.

INTERVIEWER: Press <1> to continue.

XCCN_Q01

CCNX_01

Do you have heart disease?

1 Yes

2 No

DK

RF

(Go to XCCN_END)

XCCN_Q02

CCNX_02

[Other than during pregnancy, have/Have] you ever been diagnosed with high blood pressure?

1 Yes

2 No

DK, RF

(Go to XCCN_Q04)

(Go to XCCN_Q04)

XCCN_Q03

CCNX_03

In the past month, have you taken any medicine for high blood pressure?

1 Yes

2 No

DK, RF

XCCN_Q04

CCNX_04

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

[Other than during pregnancy, have/Have] you ever been diagnosed with diabetes?

1 Yes

2 No

DK, RF

XCCN_Q05
CCNX_05

Do you have a mood disorder such as depression, bipolar disorder, mania or dysthymia?

INTERVIEWER: Include manic depression.

- 1 Yes
- 2 No
- DK, RF

XCCN_END

FOR INFORMATION ONLY

Health utility index (XHUN)

XHUN_BEG	Content block
	External variables required: PROXMODE: proxy identifier. FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. DOXHUN: do block flag, from the sample file. SEX: sex of respondent (1=male, 2=female) from sample file. Screen display: Display on header bar FNAME and LNAME separated by a space
XHUN_C01	If DOXHUN = 1, go to XHUN_R01. Otherwise, go to XHUN_END.
XHUN_R01	The next set of questions asks about your day-to-day health. The questions are <u>not</u> 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. <u>INTERVIEWER</u> : Press <1> to continue.
XHUN_Q01 HUNX_01	Are you <u>usually</u> able to see well enough to read ordinary newsprint <u>without</u> glasses or contact lenses? 1 Yes (Go to XHUN_Q04) 2 No DK, RF (Go to XHUN_END)
XHUN_Q02 HUNX_02	Are you <u>usually</u> able to see well enough to read ordinary newsprint <u>with</u> glasses or contact lenses? 1 Yes (Go to XHUN_Q04) 2 No DK, RF
XHUN_Q03 HUNX_03	Are you able to see at all? 1 Yes 2 No (Go to XHUN_Q06) DK, RF (Go to XHUN_Q06)
XHUN_Q04 HUNX_04	Are you able to see well enough to recognize a friend on the other side of the street <u>without</u> glasses or contact lenses? 1 Yes (Go to XHUN_Q06) 2 No DK, RF (Go to XHUN_Q06)

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XHUN_Q05
HUNX_05

Are you 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
- DK, RF

XHUN_Q06
HUNX_06

Are you 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 XHUN_Q11)
- 2 No (Go to XHUN_Q11)
- DK, RF (Go to XHUN_Q11)

XHUN_Q07
HUNX_07

Are you 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 XHUN_Q09)
- 2 No
- DK, RF

XHUN_Q08
HUNX_08

Are you able to hear at all?

- 1 Yes
- 2 No (Go to XHUN_Q11)
- DK, RF (Go to XHUN_Q11)

XHUN_Q09
HUNX_09

Are you 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 XHUN_Q11)
- 2 No
- DK (Go to XHUN_Q11)
- RF (Go to XHUN_Q11)

XHUN_Q10
HUNX_10

Are you 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

XHUN_Q11
HUNX_11

Are you usually able to be understood completely when speaking with strangers in your own language?

INTERVIEWER: These questions assess the respondent's ability to speak and be understood (not the ability to communicate). For instance, a respondent who can't speak but uses sign language to communicate is considered as having a speech limitation.

- 1 Yes (Go to XHUN_Q15)
- 2 No
- DK (Go to XHUN_Q15)
- RF (Go to XHUN_Q15)

XHUN_Q12
HUNX_12

Are you able to be understood partially when speaking with strangers?

- 1 Yes
- 2 No
- DK, RF

XHUN_Q13
HUNX_13

Are you able to be understood completely when speaking with those who know you well?

- 1 Yes (Go to XHUN_Q15)
- 2 No
- DK
- RF (Go to XHUN_Q15)

XHUN_Q14
HUNX_14

Are you able to be understood partially when speaking with those who know you well?

- 1 Yes
- 2 No
- DK, RF

XHUN_Q15
HUNX_15

Are you usually able to walk around the neighbourhood without difficulty and without mechanical support such as braces, a cane or crutches?

- 1 Yes (Go to XHUN_Q22)
- 2 No
- DK, RF (Go to XHUN_Q22)

XHUN_Q16
HUNX_16

Are you able to walk at all?

- 1 Yes
- 2 No (Go to XHUN_Q19)
- DK, RF (Go to XHUN_Q19)

XHUN_Q17
HUNX_17

Do you require mechanical support such as braces, a cane or crutches to be able to walk around the neighbourhood?

- 1 Yes
- 2 No
- DK, RF

XHUN_Q18
HUNX_18

Do you require the help of another person to be able to walk?

- 1 Yes
- 2 No
- DK, RF

XHUN_Q19
HUNX_19

Do you require a wheelchair to get around?

- 1 Yes
- 2 No (Go to XHUN_Q22)
- DK, RF (Go to XHUN_Q22)

XHUN_Q20
HUNX_20

How often do you use a wheelchair?

INTERVIEWER: Read categories to respondent.

- 1 Always
- 2 Often
- 3 Sometimes
- 4 Never

DK, RF

XHUN_Q21
HUNX_21

Do you need the help of another person to get around in the wheelchair?

- 1 Yes
- 2 No

DK, RF

XHUN_Q22
HUNX_22

Are you [^] usually able to grasp and handle small objects such as a pencil or scissors?

- 1 Yes (Go to XHUN_Q26)
- 2 No

DK, RF (Go to XHUN_Q26)

XHUN_Q23
HUNX_23

Do you require the help of another person because of limitations in the use of hands or fingers?

- 1 Yes
- 2 No (Go to XHUN_Q25)

DK, RF (Go to XHUN_Q25)

XHUN_Q24
HUNX_24

Do you 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

XHUN_Q25
HUNX_25

Do you 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

XHUN_Q26
HUNX_26

Would you describe [him/her/yourself] 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

XHUN_Q27
HUNX_27

How would you describe your usual ability to remember things?

INTERVIEWER: Read categories to respondent.

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

DK, RF

XHUN_Q28
HUNX_28

How would you describe your usual ability to think and solve day-to-day problems?

INTERVIEWER: Read categories to respondent.

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

DK, RF

XHUN_Q29
HUNX_29

Are you usually free of pain or discomfort?

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

DK, RF

(Go to XHUN_END)

XHUN_Q30
HUNX_30

How would you describe the usual intensity of your pain or discomfort?

INTERVIEWER: Read categories to respondent.

- 1 Mild
- 2 Moderate
- 3 Severe

DK, RF

XHUN_Q31
HUNX_31

How many activities does your pain or discomfort prevent?

INTERVIEWER: Read categories to respondent.

- 1 None
 - 2 A few
 - 3 Some
 - 4 Most
- DK, RF

XHUN_END

FOR INFORMATION ONLY

Incontinence (XINN)

XINN_BEG

Content block

External variables required:

FNAME: first name of respondent from sample file.

LNAME: last name of respondent from sample file.

DOXINN: do block flag, from the sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XINN_C01

If DOXINN = 1, go to XINN_R01.

Otherwise, go to XINN_END.

XINN_R01

Some people with chronic health conditions have difficulties with bladder or bowel control.

INTERVIEWER: Press <1> to continue.

XINN_Q01

INNX_01

Do you ever experience involuntary leakage or have difficulty controlling your bladder function?

INTERVIEWER: Another term for "involuntary leakage" of the bladder is urinary incontinence.

1 Yes

2 No

DK

RF

(Go to XINN_END)

XINN_Q02

INNX_02

Do you ever experience involuntary leakage or have difficulty controlling your bowel function?

INTERVIEWER: Another term for "involuntary leakage" of the bowel is bowel incontinence.

1 Yes

2 No

DK, RF

XINN_END

Social support (XSSN)

XSSN_BEG

Content block

External variables required:

FNAME: first name of respondent from sample file.

LNAME: last name of respondent from sample file.

PROXMODE: proxy identifier.

DOXSSN: do block flag, from the sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XSSN_C01A

If DOXSSN = 1, go to XSSN_C01B.

Otherwise, go to XSSN_END.

XSSN_C01B

If PROXMODE = 1, go to XSSN_END.

Otherwise, go to XSSN_R01.

XSSN_R01

People sometimes look to others for companionship, assistance or other types of support.

INTERVIEWER: Press <1> to continue.

XSSN_Q01
SSNX_01

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?

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 XSSN_END)

XSSN_Q02
SSNX_02

How often is each of the following kinds of support available to you if you need it:

... someone to do something enjoyable with?

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

XSSN_Q03
SSNX_03

(How often is each of the following kinds of support available to you if you need it:)

... someone to take you to the doctor if you needed it?

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

DK, RF

XSSN_Q04
SSNX_04

(How often is each of the following kinds of support available to you if you need it:)

... someone to turn to for help in an emergency?

- 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

XSSN_END

FOR INFORMATION ONLY

Medication use (XMEN)

XMEN_BEG	Content block External variables required: FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. DOXMEN: do block flag, from the sample file. DT_CON1E: respondent's condition, from XDIN. DT_VOTRESA: from module XDIN. DT_INTROXMENE: from module XNEU. DT_INTROXMENF: from module XNEU. Screen display: Display on header bar FNAME and LNAME separated by a space
XMEN_C01	If DOXMEN = 1, go to XMEN_R01. Otherwise, go to XMEN_END.
XMEN_R01	The next few questions are about medications for your ^DT_CON1E that have been prescribed by a doctor or other health professional. ^DT_INTROXMENE <u>INTERVIEWER</u> : Press <1> to continue.
XMEN_Q01 MENX_01	In the past three months, have you taken any prescription medications for your ^DT_CON1E? <u>INTERVIEWER</u> : Include non-prescription (over-the-counter) medications such as low-dose aspirin if the medication was prescribed by a doctor or health professional for the respondent's condition(s). 1 Yes (Go to XMEN_Q03) 2 No (Go to XMEN_END) DK, RF

XMEN_Q02

What are the reasons that you have not taken any prescription medications for your ^DT_CON1E in the past three months?

INTERVIEWER: Mark all that apply.

MENX_02A

01 No medication prescribed from a doctor or health professional

MENX_02B

02 Do not want to take medication at this time

MENX_02C

03 Side-effects caused by medication

MENX_02D

04 Medication not working

MENX_02E

05 Ran out of medication

MENX_02F

06 Too costly / financial constraints

MENX_02G

07 Neurological condition(s) controlled without medication/ don't need medication

MENX_02H

08 Other
DK, RF

Go to XMEN_END

XMEN_Q03

MENX_03

Do you experience any side effects caused by medications taken for your ^DT_CON1E?

1 Yes

2 No (Go to XMEN_END)

DK, RF (Go to XMEN_END)

XMEN_Q04

MENX_04

Overall, how much do these side effects affect your life?

INTERVIEWER: Read categories to respondent.

1 **Not at all**

2 **A little bit**

3 **Moderately**

4 **Quite a bit**

5 **Extremely**

DK, RF

XMEN_END

Restriction of activities (XRAN)

XRAN_BEG	Content block External variables required: FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. PROXMODE: proxy identifier. DT_CON1E: respondent's condition, from XDIN. DT_VOTRESA: from module XDIN. CURRAGE: current age of respondent, from SRC block. DOXRAN: do block flag, from the sample file. CONNUM: count of neurological conditions, from XDIN. DT_VOSLES: from module XNEU. DT_ONTA: from module XNEU. DT_AFFECTE: from module XNEU. DT_HASHAVE: from module XNEU. DT_HASHAVE_C: from module XNEU. DT_AFFECT: from module XNEU. Screen display: Display on header bar FNAME and LNAME separated by a space
XRAN_C01	If DOXRAN = 1, go to XRAN_R01. Otherwise, go to XRAN_END.
XRAN_R01	The next few questions deal with any limitations in your usual activities caused by your ^DT_CON1E. <u>INTERVIEWER</u> : Press <1> to continue.
XRAN_C02	If CURRAGE > 15, go to XRAN_Q01. Otherwise, go to XRAN_Q04.
XRAN_Q01 RANX_01	First a question about driving. Do you currently have a valid driver's license? <u>INTERVIEWER</u> : Include cars, vans, trucks and motorcycles. Include driver's licenses where an individual is permitted to drive alone with some restrictions, e.g. zero blood alcohol level. 1 Yes 2 No (Go to XRAN_Q03) DK (Go to XRAN_Q04) RF (Go to XRAN_END)
XRAN_Q02 RANX_02	^DT_HASHAVE_C your ^DT_CON1E ever prevented you from driving, even for a short period of time? 1 Yes 2 No DK, RF Go to XRAN_Q04

XRAN_Q03
RANX_03

Are you prevented from having a valid driver's license because of your ^DT_CON1E?

- 1 Yes
- 2 No
- DK, RF

XRAN_Q04
RANX_04

How much do you feel that your ^DT_CON1E ^DT_HASHAVE limited your educational opportunities?

INTERVIEWER: Read categories to respondent.

- 1 Not at all
- 2 A little bit
- 3 Moderately
- 4 Quite a bit
- 5 Extremely
- DK, RF

XRAN_Q05
RANX_05

How much do you feel that your ^DT_CON1E ^DT_HASHAVE limited your job opportunities?

INTERVIEWER: Read categories to respondent.

- 1 Not at all
- 2 A little bit
- 3 Moderately
- 4 Quite a bit
- 5 Extremely
- DK, RF

XRAN_Q06
RANX_06

How much do you feel that your ^DT_CON1E ^DT_HASHAVE limited you in getting a good night's sleep?

- 1 Not at all
- 2 A little bit
- 3 Moderately
- 4 Quite a bit
- 5 Extremely
- DK, RF

XRAN_Q07
RANX_07

Overall, how much do you feel that your ^DT_CON1E ^DT_AFFECT your life?

- 1 Not at all
- 2 A little bit
- 3 Moderately
- 4 Quite a bit
- 5 Extremely
- DK, RF

XRAN_END

Work activities (XWAN)

XWAN_BEG	Content block External variables required: FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. DT_CON1E: respondent's condition, from XNEU. DT_VOTRESA: from module XNEU. CURRAGE: current age of respondent, from SRC block. DOXWAN: do block flag, from the sample file. CONNUM: count of neurological conditions, from XDIN block. XDIN_Q04A: from module XDIN. XDIN_Q05A: from module XDIN. Screen display: Display on header bar FNAME and LNAME separated by a space
XWAN_C01	If DOXWAN = 1, go to XWAN_R01. Otherwise, go to XWAN_END.
XWAN_R01	The next questions concern work activities. <u>INTERVIEWER</u> : Press <1> to continue.
XWAN_C02	If CURRAGE > 75, go to XWAN_Q06. Otherwise, go to XWAN_Q01.
XWAN_Q01 WANX_01	Last week, did you work at a job or business (regardless of the number of hours worked)? 1 Yes (Go to XWAN_Q03) 2 No 3 Permanently unable to work (Go to XWAN_Q05) DK, RF
XWAN_Q02 WANX_02	Last week, did you have a job or business from which you were absent? 1 Yes 2 No (Go to XWAN_Q05) DK, RF (Go to XWAN_Q06)
XWAN_Q03 WANX_03	On average, how many hours do you <u>usually</u> work per week? <u>INTERVIEWER</u> : Maximum is 168. _ _ _ Hours (MIN: 0) (MAX: 168) DK, RF
XWAN_E03	An unusual value has been entered. Please confirm.
Rule :	Trigger soft edit if XWAN_Q03 > 84.

XWAN_Q04
WANX_04

In the past 3 months, how many days of work have you missed because of your ^DT_CON1E?

INTERVIEWER: Don't enter days for which time has been made up. Enter 1 day if respondent reports that they missed part of 1 day.

|_|_| Days
(MIN: 0)
(MAX: 92)

DK, RF

Go to XWAN_D08

XWAN_Q05
WANX_05

What is the main reason why you are not currently working at a job or business?

- 01 ^DT_CON1E_C
 - 02 Own other illness, condition or disability
 - 03 Caring for own children
 - 04 Caring for elder relative (60 years of age or older)
 - 05 Other personal or family responsibilities
 - 06 Going to school
 - 07 Temporary layoff due to business condition
 - 08 Seasonal layoff
 - 09 Casual job, no work available
 - 10 Work schedule (e.g. shift work)
 - 11 Self-employed, no work available
 - 12 Seasonal business
 - 13 Retired (Go to XWAN_C07)
 - 14 Other
- DK, RF

XWAN_Q06
WANX_06

Have you ever worked at a job or business?

- 1 Yes (Go to XWAN_END)
 - 2 No (Go to XWAN_END)
- DK, RF (Go to XWAN_END)

XWAN_C07

If XDIN_Q04A = 1 or XDIN_Q05A = 1, go to XWAN_D08.
Otherwise, go to XWAN_Q07.

XWAN_Q07
WANX_07

Did you have [your/NULL] ^DT_CON1E while you were working?

- 1 Yes (Go to XWAN_END)
 - 2 No (Go to XWAN_END)
- DK, RF (Go to XWAN_END)

XWAN_R08

Now some questions about changes to your work activities because of your ^DT_CON1E. Please include only changes which lasted for three months or more.

INTERVIEWER: Press <1> to continue.

XWAN_Q08
WANX_08

Because of your ^DT_CON1E, did you ever:

... change the type of work you [do/did] for a period which lasted for three months or more?

- 1 Yes
 - 2 No
- DK, RF

XWAN_Q09
WANX_09

Because of your ^DT_CON1E, did you ever:

... change the way in which you [carry/carries/carried] out your work for a period which lasted for three months or more?

- 1 Yes
 - 2 No
- DK, RF

XWAN_Q10
WANX_10

(Because of your ^DT_CON1E, did you ever:)

... reduce the number of hours you [work/worked] for a period which lasted for three months or more?

INTERVIEWER: This question refers to a consistent reduction in work hours. If respondent indicates they occasionally reduce hours at work (e.g. leaving work early because of illness or to attend medical appointments), do not count this as reduced hours.

- 1 Yes
 - 2 No (Go to XWAN_Q11)
- DK, RF (Go to XWAN_Q11)

XWAN_Q10A
WANX_10A

By how many hours a week? Was it... ?

INTERVIEWER: Read categories to respondent. If respondent reports a reduction in work hours for more than one time period, instruct the respondent to refer to the most recent time work hours were changed.

- 1 Less than 5 hours a week
 - 2 5 hours to less than 10 hours a week
 - 3 10 hours to less than 20 hours a week
 - 4 20 hours or more a week
- DK, RF

XWAN_Q10B
WANX_10B

Did you reduce your work hours... ?

INTERVIEWER: Read categories to respondent.

- 1 **Temporarily**
- 2 **Permanently** (Go to XWAN_Q11)
- DK, RF (Go to XWAN_Q11)

XWAN_Q10C
WANX_10C

For how long did you make this change to your work hours?

INTERVIEWER: If respondent reports a reduction in work hours for more than one time period, instruct the respondent to refer to the most recent time work hours were changed.

- 1 3 to 6 months
- 2 7 to 12 months
- 3 Over 1 year but less than 3 years
- 4 3 to 5 years
- 5 Over 5 years
- DK, RF

XWAN_Q11
WANX_11

Because of your ^DT_CON1E, did you ever:

... stop work altogether for a period which lasted for three months or more?

INTERVIEWER: If respondent reports stopping work on more than one occasion, instruct the respondent to refer to the most recent time.

- 1 Yes
- 2 No (Go to XWAN_END)
- DK, RF (Go to XWAN_END)

XWAN_Q11A
WANX_11A

Did you stop work... ?

INTERVIEWER: Read categories to respondent.

- 1 **Temporarily**
- 2 **Permanently** (Go to XWAN_END)
- DK, RF (Go to XWAN_END)

XWAN_Q11B
WANX_11B

For how long did you stop work?

INTERVIEWER: If respondent reports stopping work on more than one occasion, instruct the respondent to refer to the most recent time.

- 1 3 to 6 months
- 2 7 to 12 months
- 3 Over 1 year but less than 3 years
- 4 3 to 5 years
- 5 Over 5 years
- DK, RF

XWAN_END

Formal assistance received for everyday activities (XFAN)

XFAN_BEG	Content block
	External variables required: FNAME: first name of respondent from household block. LNAME: last name of specific respondent from sample file. DOXFAN: do block flag from the sample file. DT_CON1E: respondent's condition, from XNEU. DT_VOTRESA: from XNEU module.
	Screen display: Display on header bar FNAME and LNAME separated by a space
XFAN_C01	If DOXFAN = 1, go to XFAN_R01. Otherwise, go to XFAN_END.
XFAN_R01	Now, some questions on assistance you may have received at home, work or school because of your ^DT_CON1E, for things like <u>health care</u>, <u>home maker</u> or other <u>support services</u>. Please include only assistance provided by paid workers or employees, or volunteer organizations. Exclude assistance from family, friends, or neighbours. <u>INTERVIEWER</u> : Press <1> to continue.
XFAN_Q01 FANX_01	<u>In the past 12 months</u>, did you receive short-term or long-term assistance at home, work or school because of your ^DT_CON1E? <u>INTERVIEWER</u> : Include only assistance from paid workers or employees, or volunteer organizations.
	1 Yes 2 No DK, RF
	(Go to XFAN_END) (Go to XFAN_END)

FOR INFORMATION ONLY

XFAN_Q02

For which of the following activities did you receive assistance?

INTERVIEWER: Read categories to respondent. Mark all that apply. Include only health care, home maker or other support services that were provided because of a respondent's neurological condition(s).

Include only assistance from paid workers or employees, or volunteer organizations.

FANX_02A

01 Personal care such as assistance with eating, dressing, bathing, or toileting

FANX_02B

02 Medical care such as help taking medicine or help with nursing care (for example, dressing changes or foot care)

FANX_02C

03 Managing care such as making appointments or managing personal finances

FANX_02D

04 Help with activities such as housework, home maintenance or outdoor work

FANX_02E

05 Childcare

FANX_02F

06 Transportation, including trips to the doctor or for shopping

FANX_02G

07 Meal preparation or delivery

FANX_02H

08 Emotional support

FANX_02I

09 Other

DK, RF

XFAN_Q03

FANX_03

In the past 12 months, how often did you receive assistance? Was it...?

INTERVIEWER: Read categories to respondent.

1 Daily

2 At least once a week

3 At least once a month

4 Less than once a month

DK, RF

XFAN_END

Informal assistance received for everyday activities (XIAN)

XIAN_BEG

Content block

External variables required:

FNAME: first name of respondent from household block.

LNAME: last name of specific respondent from sample file.

DOXIAN: do block flag from the sample file.

DT_CON1E: respondent's condition, from XNEU.

DT_VOTRESA: from module XNEU.

SEX: sex of respondent (1=male, 2=female) from sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XIAN_C01

If DOXIAN = 1, go to XIAN_R01.

Otherwise, go to XIAN_END.

XIAN_R01

The next questions are about assistance provided by family, friends or neighbours. Please include only assistance you received at home, work or school because of your ^DT_CON1E, for things like health care, home maker or other support services. Exclude assistance from paid workers or employees, or volunteer organizations.

INTERVIEWER: Press <1> to continue.

XIAN_Q01

IANX_01

In the past 12 months, did you receive short-term or long-term assistance at home, work or school from family, friends or neighbours because of your ^DT_CON1E?

1 Yes

2 No

DK, RF

(Go to XIAN_END)

(Go to XIAN_END)

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XIAN_Q02

For which of the following activities did you receive assistance?

INTERVIEWER: Read categories to respondent. Mark all that apply. Include only health care, home maker or other support services that were provided because of respondent's condition(s).

Include only assistance from family, friends or neighbours.

IANX_02A

01 Personal care such as assistance with eating, dressing, bathing, or toileting

IANX_02B

02 Medical care such as help taking medicine or help with nursing care (for example, dressing changes or foot care)

IANX_02C

03 Managing care such as making appointments or managing personal finances

IANX_02D

04 Help with activities such as housework, home maintenance or outdoor work

IANX_02E

05 Childcare

IANX_02F

06 Transportation, including trips to the doctor or for shopping

IANX_02G

07 Meal preparation or delivery

IANX_02H

08 Emotional support

IANX_02I

09 Other

DK, RF

XIAN_R03

Now some questions about the family member, friend or neighbour, who, over the past 12 months, dedicated the most time and resources providing you with assistance for your ^DT_CON1E.

INTERVIEWER: Press <1> to continue.

XIAN_Q03

Does this person live in the same household as you?

IANX_03

1 Yes

2 No

DK, RF

(Go to XIAN_END)

XIAN_Q04

Is this person... ?

IANX_04

INTERVIEWER: Read categories to respondent.

1 Male

2 Female

DK, RF

(Go to XIAN_END)

XIAN_Q05
IANX_05

How old is this person?

|_|_|_| Years
(MIN: 10)
(MAX: 130)

DK, RF

XIAN_Q06
IANX_06

What is the relationship of this person to you?

- 01 Spouse of respondent
- 02 Common law partner of respondent
- 03 Ex-spouse/Ex-partner of respondent
- 04 Son/daughter of respondent
- 05 Father/mother of respondent
- 06 Brother/sister of respondent
- 07 Grandson/granddaughter of respondent
- 08 Grandfather/grandmother of respondent
- 09 Son-in-law/daughter-in-law of respondent
- 10 Father-in-law/mother-in-law of respondent
- 11 Brother-in-law/sister-in-law of respondent
- 12 Nephew/niece of respondent
- 13 Uncle/aunt of respondent
- 14 Cousin of respondent
- 15 Same sex partner of respondent
- 16 Friend of respondent
- 17 Neighbour of respondent

DK, RF

(Go to XIAN_END)

XIAN_E06A

An unusual relationship has been selected for a caregiver less than 15 years old. Please confirm.

Rule :

Trigger soft edit if XIAN_Q05 < 15 and XIAN_Q06 = 01 or 02 or 03 or 05 or 08 or 09 or 10 or 13 or 15.

XIAN_E06B

An unusual relationship has been selected for a caregiver over 75 years old. Please confirm.

Rule :

Trigger soft edit if XIAN_Q05 > 75 and XIAN_Q06 = 04 or 07 or 09 or 12.

XIAN_Q07
IANX_07

In the past 12 months, how often did you receive assistance from your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour]?
Was it... ?

INTERVIEWER: Read categories to respondent.

- 1 **Daily**
- 2 **At least once a week** (Go to XIAN_Q09)
- 3 **At least once a month** (Go to XIAN_Q10)
- 4 **Less than once a month** (Go to XIAN_Q11)
- DK, RF (Go to XIAN_Q13)

XIAN_Q08
IANX_08

In an average day, how many hours of assistance did you receive from your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour]?

|_| Hours
(MIN: 1)
(MAX: 24)

DK, RF

Go to XIAN_Q13

XIAN_Q09
IANX_09

Thinking about the past 12 months, in an average week, on how many days did you receive assistance from your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour]?

|_| Days
(MIN: 1)
(MAX: 7)

DK, RF

(Go to XIAN_Q13)

Go to XIAN_Q12

XIAN_Q10
IANX_10

Thinking about the past 12 months, in an average month, on how many days did you receive assistance from your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour]?

|_|_| Days
(MIN: 1)
(MAX: 31)

DK, RF (Go to XIAN_Q13)

Go to XIAN_Q12

XIAN_Q11
IANX_11

In the past 12 months, on how many days did you receive assistance from your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour]?

|_|_|_| Days
(MIN: 1)
(MAX: 366)

DK, RF (Go to XIAN_Q13)

XIAN_E11

An unusual value has been entered. Please confirm.

Rule :

Trigger soft edit if XIAN_Q11 > 12.

XIAN_Q12
IANX_12

On the days that you received help, how many hours of assistance did you receive from your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour]?

|_|_| Hours
(MIN: 1)
(MAX: 24)

DK, RF

XIAN_Q13
IANX_13

Last week, did your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] work at a job or 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 (Go to XIAN_Q15)
2 No
DK, RF

XIAN_Q14
IANX_14

Last week, did your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] have a job or business from which ^HESHE was absent?

- 1 Yes (Go to XIAN_Q16)
2 No (Go to XIAN_END)
DK, RF

XIAN_Q15
IANX_15

Does your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] work full-time or part-time?

INTERVIEWER: Full-time work is 30 hours or more per week. Part-time work is less than 30 hours per week.

- 1 Full-time
2 Part-time
DK, RF

Go to XIAN_D18

XIAN_Q16
IANX_16

Has your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] ever worked at a job or business?

INTERVIEWER: Include self-employment.

- 1 Yes (Go to XIAN_END)
2 No (Go to XIAN_END)
DK, RF (Go to XIAN_END)

XIAN_Q17
IANX_17

Did your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] work at a job or business at the same time as ^HESHE was providing assistance to you?

- 1 Yes
- 2 No (Go to XIAN_END)
- DK, RF (Go to XIAN_END)

XIAN_Q18
IANX_18

In order to care for you, did your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] ever:

... reduce the number of hours ^HESHE [works/worked] for a period which lasted for three months or more?

INTERVIEWER: This question refers to a consistent reduction in work hours. If respondent indicates the person occasionally reduces/reduced hours at work (e.g. leaving work early to provide care), do not count this as reduced hours.

- 1 Yes
- 2 No
- DK, RF

XIAN_Q19
IANX_19

In order to care for you, did your [husband/wife/common law partner/ex-partner/son/daughter/father/mother/brother/sister/grandson/granddaughter/grandfather/grandmother/son-in-law/daughter-in-law/father-in-law/mother-in-law/brother-in-law/sister-in-law/nephew/niece/uncle/aunt/cousin/partner/friend/neighbour] ever:

... stop work altogether for a period which lasted for three months or more?

INTERVIEWER: If respondent reports the person stopped work on more than one occasion, instruct the respondent to refer to the most recent time.

- 1 Yes
- 2 No
- DK, RF

XIAN_END

Out-of-pocket expenses (XOPN)

XOPN_BEG	Content block External variables required: FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. DT_CON1E: respondent's condition, from XNEU. DT_VOTRESA: from module XNEU. XFAN_Q01: from module XFAN. DOXOPN: do block flag, from the sample file. PROXMODE: proxy identifier. Screen display: Display on header bar FNAME and LNAME separated by a space.
XOPN_C01	If DOXOPN = 1, go to XOPN_R01. Otherwise, go to XOPN_END.
XOPN_R01	The next few questions are about any <u>out-of-pocket</u> or <u>direct expenses</u> you may have had because of your ^DT_CON1E. <u>Exclude</u> amounts for which you have been or will be reimbursed by any insurance or government program. <u>INTERVIEWER</u> : Press <1> to continue.
XOPN_Q01 OPNX_01	In the past 12 months, did you have any out-of-pocket or direct expenses for prescription and non-prescription (over-the-counter) medications taken for your ^DT_CON1E, for which you will not be reimbursed? <u>INTERVIEWER</u> : Respondents should include their own expenses as well as those of family members living with them. 1 Yes 2 No (Go to XOPN_Q03) DK, RF (Go to XOPN_Q03)

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XOPN_Q02
OPNX_02

What is your best estimate of the expenses for prescription and non-prescription medications taken for your ^DT_CON1E in the past 12 months? Please stop me when I have read the category which applies to you. Was it... ?

INTERVIEWER: Read categories to respondent.

Exclude expenses for which the respondent has been or will be reimbursed by any insurance or government program, such as government tax credits, direct government financial support, private health insurance, etc.

- 1 Less than \$100
- 2 \$100 to less than \$200
- 3 \$200 to less than \$500
- 4 \$500 to less than \$1,000
- 5 \$1,000 to less than \$2,000
- 6 \$2,000 to less than \$5,000
- 7 \$5,000 or more

DK, RF

XOPN_Q03
OPNX_03

In the past 12 months, did you have any out-of-pocket or direct expenses for assistive devices such as mobility aids, agility aids or specialized equipment that were required because of your ^DT_CON1E for which you will not be reimbursed?

INTERVIEWER: Respondents should include their own expenses as well as those of family members living with them.

An assistive device is any device that is designed or adapted to help a person to perform a particular task. For example, canes, crutches, reachers and power-lift chairs are all assistive devices.

- 1 Yes
 - 2 No (Go to XOPN_Q05)
- DK, RF (Go to XOPN_Q05)

XOPN_Q04
OPNX_04

What is your best estimate of the expenses for assistive devices that were required because of your ^DT_CON1E in the past 12 months? Please stop me when I have read the category which applies to you. Was it... ?

INTERVIEWER: Read categories to respondent.

Exclude expenses for which the respondent has been or will be reimbursed.

- 1 Less than \$100
- 2 \$100 to less than \$200
- 3 \$200 to less than \$500
- 4 \$500 to less than \$1,000
- 5 \$1,000 to less than \$2,000
- 6 \$2,000 to less than \$5,000
- 7 \$5,000 or more

DK, RF

XOPN_Q05
OPNX_05

In the past 12 months, did you have any out-of-pocket or direct expenses for rehabilitation therapy such as physical, occupational, speech or massage therapy that was required because of your ^DT_CON1E for which you will not be reimbursed?

INTERVIEWER: Respondents should include their own expenses as well as those of family members living with them.

- 1 Yes
- 2 No (Go to XOPN_C07)
- DK, RF (Go to XOPN_C07)

XOPN_Q06
OPNX_06

What is your best estimate of the expenses for rehabilitation therapy that was required because of your ^DT_CON1E in the past 12 months? Please stop me when I have read the category which applies to you. Was it... ?

INTERVIEWER: Read categories to respondent.

Exclude expenses for which the respondent has been or will be reimbursed.

- 1 Less than \$100
- 2 \$100 to less than \$200
- 3 \$200 to less than \$500
- 4 \$500 to less than \$1,000
- 5 \$1,000 to less than \$2,000
- 6 \$2,000 to less than \$5,000
- 7 \$5,000 or more
- DK, RF

XOPN_C07

If XFAN_Q01 = 2, DK or RF, go to XOPN_END.
Otherwise, go to XOPN_Q07.

XOPN_Q07
OPNX_07

In the past 12 months, did you have any out-of-pocket or direct expenses for home care services such as health care, homemaker, or other support services that were required because of your ^DT_CON1E, for which you will not be reimbursed?

INTERVIEWER: Respondents should include their own expenses as well as those of family members living with them.

- 1 Yes
- 2 No (Go to XOPN_END)
- DK, RF (Go to XOPN_END)

XOPN_Q08
OPNX_08

What is your best estimate of the expenses for home care services that were required because of your ^DT_CON1E in the past 12 months? Please stop me when I have read the category which applies to you. Was it... ?

INTERVIEWER: Read categories to respondent.

Exclude expenses for which the respondent has been or will be reimbursed.

- 1 Less than \$100
- 2 \$100 to less than \$200
- 3 \$200 to less than \$500
- 4 \$500 to less than \$1,000
- 5 \$1,000 to less than \$2,000
- 6 \$2,000 to less than \$5,000
- 7 \$5,000 or more

DK, RF

XOPN_END

FOR INFORMATION ONLY

Stigma (XSGN)

XSGN_BEG

Content block

External variables required:

FNAME: first name of respondent from the sample file.
LNAME: last name of respondent from the sample file.
PROXMODE: proxy identifier, from the GR block.
DT_CON1E: respondent's condition, from XNEU.
DT_MONMES: from module XNEU.
DT_VOTRESA: from module XNEU.
DOXSNG: do block flag, from the sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XSGN_C01

If DOXSNG = 1, go to XSGN_C02.
Otherwise, go to XSGN_END.

XSGN_C02

If PROXMODE = 1, go to XSGN_END.
Otherwise, go to XSGN_R01.

XSGN_R01

The next questions are about how your interactions with other people have been affected because of your ^DT_CON1E.

I am going to read you a series of statements. For each of the following statements, please tell me how often you have felt that way lately.

INTERVIEWER: Press <1> to continue.

XSGN_Q01
SGNX_01

Because of my ^DT_CON1E, some people seemed uncomfortable with me.

INTERVIEWER: Read categories to respondent.

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

XSGN_Q02
SGNX_02

Because of my ^DT_CON1E, some people avoided me.

INTERVIEWER: Read categories to respondent.

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

XSGN_Q03
SGNX_03

Because of my ^DT_CON1E, I felt left out of things.

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

XSGN_Q04
SGNX_04

I felt embarrassed about my ^DT_CON1E.

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

XSGN_END

FOR INFORMATION ONLY

Depression (XDEN)

XDEN_BEG	Content block External variables required: PROXMODE: proxy identifier. FNAME: first name of respondent from sample file. LNAME: last name of respondent from sample file. DOXDEN: do block flag, from the sample file. Screen display: Display on header bar FNAME and LNAME separated by a space
XDEN_C01	If DOXDEN = 1, go to XDEN_C02. Otherwise, go to XDEN_END.
XDEN_C02	If PROXMODE = 1, go to XDEN_END. Otherwise, go to XDEN_R01.
XDEN_R01	The following questions deal with problems you may have had during the last two weeks. <u>INTERVIEWER</u> : Press <1> to continue.
XDEN_Q01 DENX_01	Over the last two weeks, how often have you: ... had little interest or pleasure in doing things? <u>INTERVIEWER</u> : Read categories to respondent. 1 Not at all 2 Several days 3 More than half the days 4 Nearly every day DK RF (Go to XDEN_END)
XDEN_Q02 DENX_02	Over the last two weeks, how often have you: ... felt down, depressed, or hopeless? <u>INTERVIEWER</u> : Read categories to respondent. 1 Not at all 2 Several days 3 More than half the days 4 Nearly every day DK, RF

XDEN_Q03
DENX_03

(Over the last two weeks, how often have you:)

... had trouble falling or staying asleep, or sleeping too much?

INTERVIEWER: Read categories to respondent.

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

DK, RF

XDEN_Q04
DENX_04

(Over the last two weeks, how often have you:)

... felt tired or had little energy?

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

DK, RF

XDEN_Q05
DENX_05

(Over the last two weeks, how often have you:)

... had poor appetite or overate?

INTERVIEWER: The term "poor appetite" refers to not being hungry, or eating less than usual.

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

DK, RF

XDEN_Q06
DENX_06

Over the last two weeks, how often have you:

... felt bad about yourself, or that you are a failure or have let yourself or your family down?

INTERVIEWER: Read categories to respondent.

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

DK, RF

XDEN_Q07
DENX_07

(Over the last two weeks, how often have you:)

... had trouble concentrating on things, such as reading the newspaper or watching television?

- 1 Not at all
 - 2 Several days
 - 3 More than half the days
 - 4 Nearly every day
- DK, RF

XDEN_Q08
DENX_08

(Over the last two weeks, how often have you:)

... been moving or speaking so slowly that other people could have noticed? Or the opposite, being so fidgety or restless that you have been moving around a lot more than usual?

- 1 Not at all
 - 2 Several days
 - 3 More than half the days
 - 4 Nearly every day
- DK, RF

XDEN_Q09
DENX_09

(Over the last two weeks, how often have you:)

... had thoughts that you would be better off dead, or of hurting yourself?

- 1 Not at all
 - 2 Several days
 - 3 More than half the days
 - 4 Nearly every day
- DK, RF

XDEN_C10

If (XDEN_Q01 = 2, 3, 4 or XDEN_Q02 = 2, 3, 4 or XDEN_Q03 = 2, 3, 4 or XDEN_Q04 = 2, 3, 4 or XDEN_Q05 = 2, 3, 4 or XDEN_Q06 = 2, 3, 4 or XDEN_Q07 = 2, 3, 4 or XDEN_Q08 = 2, 3, 4 or XDEN_Q09 = 2, 3, 4), go to XDEN_Q10.
Otherwise, go to XDEN_END.

XDEN_Q10
DENX_10

How difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

INTERVIEWER: Read categories to respondent.

- 1 **Not difficult at all**
 - 2 **Somewhat difficult**
 - 3 **Very difficult**
 - 4 **Extremely difficult**
- DK, RF

XDEN_END

Education (XEDN)

XEDN_BEG

Content block

External variables required:

FNAME: first name of respondent from sample file.

LNAME: last name of respondent from sample file.

DOXEDN: do block flag, from the sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space.

XEDN_C01

If DOXEDN = 1, go to XEDN_R01.

Otherwise, go to XEDN_END.

XEDN_R01

Next, education.

INTERVIEWER: Press <1> to continue.

XEDN_Q01

EDNX_01

What is the highest certificate, diploma or degree that you have completed?

- 1 Less than high school diploma or its equivalent
- 2 High school diploma or a high school equivalency certificate
- 3 Trade certificate or diploma
- 4 College, CEGEP or other non-university certificate or diploma (other than trades certificates or diplomas)
- 5 University certificate or diploma below the bachelor's level
- 6 Bachelor's degree (e.g. B.A., B.Sc., LL.B.)
- 7 University certificate, diploma or degree above the bachelor's level

DK, RF

XEDN_END

Income (XHIN)

XHIN_BEG

Content block

External variables required:

FNAME: first name of respondent from sample file.

LNAME: last name of respondent from sample file.

DOXHIN: do block flag, from the sample file.

Screen display:

Display on header bar FNAME and LNAME separated by a space

XHIN_C01

If DOXHIN = 1, go to XHIN_D01.

Otherwise, go to XHIN_END.

XHIN_R01

Now a question about your total household income.

INTERVIEWER: Press <1> to continue.

XHIN_Q01

HINX_01

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?

Income can come from various sources such as from work, investments, or government. Examples include Employment Insurance, Social Assistance, Child Tax Benefit and other income such as child support, alimony and rental income.

|_|_|_|_|_|_|_| Income

(MIN: -9,000,000)

(MAX: 9,000,000)

DK, RF

(Go to XHIN_Q02)

Go to XHIN_END

XHIN_Q02

HINX_02

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, including income loss**

2 **\$50,000 and more**

(Go to XHIN_Q04)

DK, RF

(Go to XHIN_END)

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XHIN_Q03
HINX_03

Please stop me when I have read the category which applies to your household. Was it... ?

INTERVIEWER: Read categories to respondent.

- 1 Less than \$5,000
 - 2 \$5,000 to less than \$10,000
 - 3 \$10,000 to less than \$15,000
 - 4 \$15,000 to less than \$20,000
 - 5 \$20,000 to less than \$30,000
 - 6 \$30,000 to less than \$40,000
 - 7 \$40,000 to less than \$50,000
- DK, RF

Go to XHIN_END

XHIN_Q04
HINX_04

Please stop me when I have read the category which applies to your household. Was it... ?

INTERVIEWER: Read categories to respondent.

- 1 \$50,000 to less than \$60,000
 - 2 \$60,000 to less than \$70,000
 - 3 \$70,000 to less than \$80,000
 - 4 \$80,000 to less than \$90,000
 - 5 \$90,000 to less than \$100,000
 - 6 \$100,000 to less than \$150,000
 - 7 \$150,000 and over
- DK, RF

XHIN_END

FOR INFORMATION ONLY

Administration (XADM)

XADM_BEG	Content block External variables required: DOXADM: do block flag, from the sample file. PROV: province from SRC block. RTYPE: if respondent is a CCHS respondent or not, from sample file. CCHSYR: year CCHS was completed. PROXMODE: proxy identifier. FNAME: first name of specific respondent from sample file. LNAME: last name of specific respondent from sample file. Screen display: Display on header bar FNAME and LNAME separated by a space
XADM_C01	If DOXADM = 1, go to XADM_D01. Otherwise, go to XADM_END.
XADM_R01	[Statistics Canada, your provincial ministry of health and the "Institut de la Statistique du Québec"/Statistics Canada and your provincial ministry of health] would like your permission to link information collected during this interview. This includes linking your survey information to your past and continuing use of health services such as visits to hospitals, clinics and doctor's offices. <u>INTERVIEWER</u> : Press <1> to continue.
XADM_Q01 ADMX_01	These organizations have agreed to keep your survey information confidential and use it only for statistical purposes. Do we have your permission for linkage? 1 Yes 2 No (Go to XADM_D03) DK, RF (Go to XADM_D03)
XADM_Q02A ADMX_02A	Having a provincial health number will assist us in linking to this other information. Do you have [an/a] [Newfoundland and Labrador/Prince Edward Island/Nova Scotia/New Brunswick/Quebec/Ontario/Manitoba/Saskatchewan/Alberta/British Columbia] health number? 1 Yes (Go to XADM_Q02C) 2 No (Go to XADM_D03) DK, RF

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XADM_Q02B
ADMX_02B

For which province is your 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
- 88 Does not have a provincial health number (Go to XADM_D03)
- DK, RF (Go to XADM_D03)

XADM_Q02C

What is your health number?

INTERVIEWER: Enter a provincial health number. Do not insert blanks, hyphens or commas between the numbers.

(12 spaces)

DK, RF

XADM_C03

If RTYPE = 1, go to XADM_R04.
Otherwise, go to XADM_R03A.

XADM_R03A

Statistics Canada would like your permission to share the information collected in this survey with the Public Health Agency of Canada, Health Canada ^SHAREE.

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.

Press <1> to continue.

XADM_Q03B
ADMX_03B

These organizations have agreed to keep the information confidential and use it only for statistical purposes. Do you agree to share the information provided?

- 1 Yes
- 2 No
- DK, RF

Go to XADM_END

XADM_R04

In order to reduce the number of questions on today's survey, Statistics Canada would like to link information from this interview with your information from the ^CCHSYR Canadian Community Health Survey.

INTERVIEWER: Press <1> to continue.

Survey on Living with Neurological Conditions in Canada (SLNCC) - 2011

XADM_Q04
ADMX_04

The linked information will be kept strictly confidential and used only for statistical purposes. Do we have your permission?

- 1 Yes
- 2 No (Go to XADM_R06)
- DK, RF (Go to XADM_R06)

XADM_R05

Statistics Canada would like your permission to share the linked survey data, that is your information from today's interview and your information from the Canadian Community Health Survey, with the Public Health Agency of Canada, Health Canada ^SHAREE.

INTERVIEWER: The Public Health Agency of Canada is a federal government department responsible for promoting and protecting the health and safety of Canadians.

Press <1> to continue.

XADM_Q05
ADMX_05

These organizations have agreed to keep information from both surveys confidential and use it only for statistical purposes. Do we have your permission?

INTERVIEWER: Personal identifiers such as name, address, telephone number, and health number will not be provided to the Public Health Agency of Canada or to Health Canada.

- 1 Yes (Go to XADM_END)
- 2 No
- DK, RF

Go to XADM_R07

XADM_R06

Although you do not agree to link the information collected in today's interview to the ^CCHSYR Canadian Community Health Survey, we would like your permission to share only the information collected today with the Public Health Agency of Canada, Health Canada ^SHAREE.

INTERVIEWER: The Public Health Agency of Canada is a federal government department responsible for promoting and protecting the health and safety of Canadians.

Press <1> to continue.

XADM_Q06
ADMX_06

These organizations have agreed to keep the information confidential and use it only for statistical purposes.

Do you agree to share the information from today's interview?

INTERVIEWER: The information that is shared will not be linked to their previous Canadian Community Health Survey interview.

- 1 Yes
- 2 No
- DK, RF

Go to XADM_END

XADM_R07

Although you do not agree to share the linked survey information, we would like your permission to share only the information collected in today's interview with the Public Health Agency of Canada, Health Canada ^SHAREE.

INTERVIEWER: The Public Health Agency of Canada is a federal government department responsible for promoting and protecting the health and safety of Canadians.

Press <1> to continue.

XADM_Q07
ADMX_07

These organizations have agreed to keep the information confidential and use it only for statistical purposes.

Do you agree to share the information from today's interview?

INTERVIEWER: The information that is shared will not be linked to their previous Canadian Community Health Survey interview.

- 1 Yes
- 2 No
- DK, RF

XADM_END

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