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Section:	Health status (HS)
HS_BEG	Beginning of section
HS_R01	First, I'd like to ask you a few questions about your health.
HS_Q01	In general, would you say your health is?
	INTERVIEWER: Read categories to respondent.
1 2 3 4 5	Excellent Very good Good Fair Poor DK, RF
Coverage:	All respondents
HS_Q02	Compared to one year ago, how would you say your nealth is now? Is it?
	INTERVIEWER: Read categories to respondent.
1 2 3 4 5	Much better now than 1 year ago Somewhat better now (than 1 year ago) About the same Somewhat worse now (than 1 year ago) Much worse now (than 1 year ago) DK, RF
Coverage:	All respondents
HS_END	End of section
Section:	Primary health care type (PT)
PT_BEG	Begin ing of section
PT_R01	Now I'd like to ask about your primary health care. It is often the main source of preventive as well as ongoing or essential care people receive.
PT_Q01	Is there a place that you usually go to if you are sick or need advice about your health?
1 2	Yes(Go to PT_Q02) No DK, RF
Default:	(Go to PT_Q03)
Coverage:	All respondents

PT_Q02	What kind of place is it?
	INTERVIEWER: Read categories to respondent.
01 02 03 04 05 06 07	A doctor's office, clinic or practice A walk-in clinic An urgent care centre An emergency department or emergency room A CLSC A community health centre Other DK, RF
Coverage:	Respondents who have a usual place that they go to if they are sick or need advice the it their health
PT_Q03	Do you have a regular medical doctor?
1 2	Yes(Go to PT_Q05) No DK, RF
Default:	(Go to PT_Q04)
Coverage:	All respondents
PT_Q04	Why do you not have a regular medical doctor?
1 2 3 4 5	No medical doctors available in the area Medical doctors in the area are not taking new patients Have not tried to contact one Had a medical doctor who left or retired In good health, co not need a doctor DK, RF
Default:	(Go to TT_FND)
Coverage:	Respondents who do not have a regular medical doctor
PT_Q05	ւ mat regular medical doctor a family physician, general practitioner or a pecialist physician such as a cardiologist or an oncologist?
1 2 3 4	Family physician General practitioner Specialist Other DK, RF
Coverage:	Respondents who have a regular medical doctor
PT_END	End of section
Section:	Health care use (HU)
HU_BEG	Beginning of section

HU_C01	If PT_Q01 = 1 (Yes) or PT_Q03 = 1 (Yes)(Go to HU_R01)
110_001	Otherwise(Go to HU_END)
HU_R01	You told us that you have a regular doctor or place where you go for health care.
	During the interview, [primary care provider] was replaced with the appropriate fill according to the answers to PT_Q05 and PT_Q02. If PT_Q05 = 1, then family physician; if PT_Q05 = 2, then general practitioner; else, if PT_Q05 = 3, then specialist.
	If PT_Q02 = 1, then doctor's office; if PT_Q02 = 2, then walk-in cinic; if PT_Q02 = 3, then urgent care centre; if PT_Q02 = 4, then emergency department; if PT_Q02 = 5, then CLSC; if PT_Q02 = 6, then community health centre; otherwise = primary care provider.
HU_Q01	Is there a nurse working with your [primary care provider] wno is regularly involved in your health care?
1 2	Yes No DK, RF
Coverage:	Respondents who have a regular medical doctor or who have a place that they usually go to if they are sick or need advice about their health
HU_Q02	Other than your [primary care provider], other doctors and a nurse, are there other health professionals like dieticians and nutritionists working in the same office where you get your regular health care?
1 2	Yes No DK, RF
Coverage:	Respondents who have a regular medical doctor or who have a place that they usually go to if they are sick or need advice about their health
HU_Q03	How long have you been seeing or going to this [primary care provider]?
1 2 3 4 5	Less than one year 1 to 2 years 3 to 4 years 5 to 7 years More than 7 years DK, RF
Coverage:	Respondents who have a regular medical doctor or who have a place that they usually go to if they are sick or need advice about their health

HU_Q04	When you go to your [primary care provider], how often are you taken care of by the same family physician or nurse each time?
	INTERVIEWER: Read categories to respondent.
01	Always
02	Often
03	Sometimes
04	Rarely
05	Never
06	Not applicable
	DK, RF
Coverage:	Respondents who have a regular medical doctor or who have a place that they usually co to if they are sick or need advice about their health
HU_Q05	How often does your [primary care provider] help you coordinate the care you receive from other doctors and places when you need it?
	INTERVIEWER: Read categories to respondent.
01	Always
02	Often
03	Sometimes
04	Rarely
05	Never
06	Not applicable (never needed to have ccre coordinated) DK, RF
Coverage:	Respondents who have a regular medical coctor or who have a place that they usually go to if they are sick or need advice about their could be seen to be a sick or need advice about their could be seen to be s
HU_Q06	Not including hospital emergency departments, does your [primary care provider] have after hour access where patients can be seen by or talk to a doctor or nurse when the practice is closed?
1 2	Yes No DK, RI-
Coverage:	Recondents who have a regular medical doctor or who have a place that they usually go to if they are sick or need advice about their health
HU_RC7	Please tell me the extent to which you agree or disagree with the following statements:

HU_Q07	Your [primary care provider] delivers a range of services that meets most or all of your primary health care needs. Do you?
	INTERVIEWER: Read categories to respondent.
1	Strongly agree
2	Agree
3	Disagree
4	Strongly disagree
	DK, RF
Coverage:	Respondents who have a regular medical doctor or who have a place that they usually go to if they are sick or need advice about their health
HU_Q08	I would recommend my [primary care provider] to a friend or relative? Do
_ `	you?
	INTERVIEWER: Read categories to respondent.
	INTERVIEWER. Read categories to respondent.
1	Strongly agree
2	Agree
3	Disagree
4	Strongly disagree
5	Not applicable (doctor is retiring or not taking ne v patients) DK, RF
Coverage:	Respondents who have a regular medical doctor or who have a place that they usually go to if they are sick or need advice about their healt.
HU_END	End of section
Section:	Health care utilization (HZ)
HZ_BEG	Beginning of section
HZ_R01	Now, I'd like to ask you about various health professionals you have seen or talked to in the past 12 months, that is from (current date minus one year) to resterday.
HZ_Q01A	in the past 12 months, have you been a patient overnight in a hospital, running home or convalescent home?
1 2	Yes(Go to HZ_Q01B) No DK, RF
Default:	(Go to HZ_Q03)
Coverage:	All respondents

HZ_Q01B	For how many nights in the past 12 months?
	(3 spaces) [Min: 1 Max: 365] DK, RF
Coverage:	Respondents who in the past 12 months have been an overnight patient in a hospital, nursing home or convalescent home
HZ_Q02	After you left the hospital, did your [primary care provider] seem informed and up-to-date about the plan for follow-up care?
1	Yes
2 3	No Not applicable - did not see regular doctor after the hospitalization/ did not have a plan/started seeing this doctor after I got out of the hospital DK, RF
Coverage:	Respondents who in the past 12 months have been an overnight patient and pital, nursing home or convalescent home
HZ_Q03	(Not counting when you were an overnight patient, how many times have you seen or talked about your mental, emotional or physical health with a family physician (or general practitioner)?
	INTERVIEWER: Include face to face and welphone contacts.
	(3 spaces) [Min: 0 Max: 995] DK, RF
Coverage:	All respondents
HZ_Q04	(Not counting when 'we're an overnight patient, in/ln) the past 12 months, how many imes have you seen or talked about your mental, emotional or phesical health with a nurse?
	(3 spaces) [Min: 0 Max: 995] DK, PF
Coverage:	All respond ints
HZ_Q05	(Not counting when you were an overnight patient, in/ln) the past 12 months, how many times have you seen or talked about your mental, emotional or physical health with a physiotherapist, social worker or counsellor?
	(3 spaces) [Min: 0 Max: 995] DK, RF
Coverage:	All respondents

HZ_Q06	(Not counting when you were an overnight patient, in/ln) the past 12 months, how many times have you seen or talked about your mental, emotional or physical health with a pharmacist or dietician?
	INTERVIEWER: Include filling in a prescription.
	(3 spaces) [Min: 0 Max: 995] DK, RF
Coverage:	All respondents
HZ_Q07	(Not counting when you were an overnight patient, in/ln) the past 12 months, how many times have you seen or talked about your mental, emotional or physical health with any other medical doctor or enecialist, for example, a surgeon, a cardiologist, or a psychiatrist?
	(3 spaces) [Min: 0 Max: 995] DK, RF
Coverage:	All respondents
HZ_C08	If HZ_Q07 >=1
HZ_Q08A	Thinking of the most recent time you say or talked to a specialist about your mental, emotional or physical health, did you have a follow-up appointment with your [primary care provider] to talk about those health issues?
1 2	Yes(Go to HZ_Q08B) No DK, RF
Default:	(Go to HZ_C09)
Coverage:	Responding with have seen at least one other doctor or specialist in the past 12 months
HZ_Q08B	Thinking of that follow-up appointment, did your [primary care provider] na /e information or test results from the specialist?
1 2	'es No DK, RF
Coverage:	Respondents who in the past 12 months have seen at least one other doctor or specialist and who have had a follow-up appointment with their primary care provider

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HZ_Q09	(Not counting when you were an overnight patient, in/ln) the past 12 months, how often did you talk with a health professional about specific things you could do to improve your health or prevent illness such as smoking cessation, limiting alcohol consumption, and exercise, etc.?
	<u>INTERVIEWER</u> : Read categories to respondent. Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months) Not applicable DK, RF
Coverage:	All respondents
HZ_Q10	(Not counting when you were an overnight patient, inh.) the past 12 months, how often did you get the help you wante to reach or maintain a healthy body weight?
	INTERVIEWER: Read categories to respondent. Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 mcths) Not applicable DK, RF
Coverage:	All respondents
HZ_END	End of section
Section:	Experiences with primary health care providers (EP)
EP_BEG	Be ginning of section
EP_C01	I/ HZ_Q03 = 0, DK or RF
EP_R01	The next questions are about your experiences when receiving health care from the family physician (or general practioner) who is most responsible for your regular care.
	<u>INTERVIEWER</u> : (if necessary ask): For all of these questions, if you've seen more than one family physician (or general practitioner), please think about the one who is most responsible for your care.

	-
EP_Q01	In the past 12 months, how often did your family physician (or general practitioner) explain your test results in a way that you could understand? (such as blood tests, x-rays, or cancer screening tests)
	<u>INTERVIEWER</u> : Read categories to respondent. Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months) Not applicable DK, RF
Coverage:	Respondents who have seen or talked to a family physician or general practition or in the past 12 months
EP_Q02	In the past 12 months, how often did your family physician (or general practitioner) take your health concerns very seriol sly?
	INTERVIEWER: Read categories to respondent. Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months, Not applicable DK, RF
Coverage:	Respondents who have the control of talked to a family physician or general practitioner in the past 12 months
EP_Q03	In the past 1.2 months, how often did your family physician (or general practitioner) in 'olve you in clinical decisions about your health care? For example, decisions related to [tests]. ***TERVIL:WER**: Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months) Not applicable DK, RF
Note:	During the interview, the term [tests] was replaced with gender specific examples. Tests for males include screening tests for prostate cancer, cardiovascular risk assessment, or family planning, etc. Tests for females include pap smears, screening tests for breast cancer, family planning, etc.

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Respondents who have seen or talked to a family physician or general practitioner in the past 12 months

Coverage:

EP_Q04	In the past 12 months, how often have test results or medical records not been available to your family physician (or general practioner) at the time of your scheduled appointment?
	<u>INTERVIEWER</u> : Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months) Not applicable DK, RF
Coverage:	Respondents who have seen or talked to a family physician or general practition or in the past 12 months
EP_Q05	In the past 12 months, how often have medical tests of procedures been repeated unnecessarily because the test had already been done?
	INTERVIEWER: Probe to distinguish 'Never in pact 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months, Not applicable DK, RF
Coverage:	Respondents who have sen or talked to a family physician or general practitioner in the past 12 months
EP_Q06	In the past 1.2 months, how often have you received conflicting information from different physicians or health care professionals?
,	INTER (IEWER: Probe to distinguish 'Never in past 12 months' from 'Not ap licable'.
01 02 03 04 05 06	Alv. ays Usually Sometimes Rarely Never (in the past 12 months) Not applicable DK, RF
Coverage:	Respondents who have seen or talked to a family physician or general practitioner in the past 12 months

	-
EP_Q07	Overall, how often does your family physician (or general practioner) allow you enough time to discuss your feelings, fears and concerns about your health?
	INTERVIEWER: Probe to distinguish 'Never in past 12 months' from 'Not applicable'.
01 02 03 04 05 06	Always Usually Sometimes Rarely Never (in the past 12 months) Not applicable DK, RF
Coverage:	Respondents who have seen or talked to a family physician or general practition or in the past 12 months
EP_Q08	Overall, how do you rate the quality of health care that you have received in the past 12 months from the family physician (or general practioner) you rely on most for your care?
	INTERVIEWER: Read categories to respondent.
01 02 03 04 05 06	Excellent Very good Good Fair Poor Not applicable DK, RF
Coverage:	Respondents who have per or talked to a family physician or general practitioner in the past 12 months
EP_Q09	Overall, how to you rate the quality of health care that you have received in the past 12 months?
01 02 03 04 05 06	INTER (IEV/ER: Read categories to respondent. Exculent Very good Good Fair Poor Not applicable DK, RF
Coverage:	Respondents who have seen or talked to a family physician or general practitioner in the past 12 months
EP_END	End of section
Section:	Access to health care (AC)
AC_BEG	Beginning of section

AC_R01	The next questions are about any problems you may have had accessing care that you may have needed in the past 12 months.
AC_Q01	In the past 12 months, did you require health information or advice?
1 2	Yes No
Coverage:	All respondents
AC_Q02A	In the past 12 months, did you ever experience any difficulties getting the health information or advice you needed?
1 2	Yes No
Coverage:	Respondents who required health information or advice in the past 12 m. nths
AC_Q02B	What type of difficulties did you experience?
01 02 03 04 05 06 07	INTERVIEWER: Mark all that apply. Difficulty contacting a physician or nurse Did not have a phone number Could not get through (i.e., no answer) Waited too long to speak to someo. a Did not get adequate info or advice Did not know where to go call/uninformed Unable to leave the house because of a health problem Other - Specify
Default:	(Go to AC_C03)
Coverage:	Respondence who experienced difficulties getting the health information or advice they needed in the past 10 months
AC_S02B	at type of difficulties did you experience?
E	<u>'NERVIEWER</u> : Specify(80 spaces)

AC_Q03	Thinking about the last time you required health information or advice, where did you get that information or advice?
01 02 03 04 05 06 07 08	Primary care provider (usual family physician or usual place of care) Walk-in clinic CLSC/Community health centre Emergency department Telephone help line Specialist's clinic Internet Another source DK, RF
Coverage:	Respondents who required health information or advice in the past 12 months
AC_Q04A	In the past 12 months, have you called a telephone help 'inc for medical or health information or advice?
1 2	Yes No(Go to AC_R05) DK, RF(Go to AC_R05)
Coverage:	All respondents
AC_Q04B	Was the information or advice given on the help line?
	INTERVIEWER: Read categories to respondent.
1 2 3	Very helpful Somewhat helpful Not at all helpful DK, RF
Coverage:	Respondents who ir the part 12 months have called a telephone help line for medical or health information or advice
AC_R05	The next questions are about situations when you needed routine or ongoing care for things such as check-ups and blood tests.
AC_Q05	In the past 12 months, did you require any routine or ongoing care?
1 2	Ye. (Go to AC_R12) DK, RF. (Go to AC_R12)
Coverage:	All respondents
AC_Q06	In the past 12 months, did you ever experience any difficulties getting the routine or ongoing care you needed?
1 2	Yes No(Go to AC_Q08) DK, RF(Go to AC_Q08)
Coverage:	Respondents who required routine or ongoing care in the past 12 months

AC_Q07	What type of difficulties did you experience?
	INTERVIEWER: Mark all that apply.
01 02 03 04 05 06 07 08 09 10 11 12	Difficulty contacting a physician Difficulty getting an appointment Do not have personal/family physician Waited too long to get an appointment Waited too long to see the physician (i.e., in-office waiting) Service not available at time required Service not available in the area Transportation problems Cost Language problems Did not know where to go (i.e., information problems) Unable to leave the house because of a health problem Other - Specify
Default:	(Go to AC_Q08)
Coverage:	Respondents who in the past 12 months experienced difficulties gotting the routine or ongoing care they needed
AC_S07	What type of difficulties did you experience:
AC_Q08	<pre>INTERVIEWER: Specify(80 spaces) In the past 12 months how often did you experience any language barriers</pre>
	when trying to get in urine or ongoing care you needed?
01 02 03 04 05 06	INTERVIEWER: Reac categories to respondent. Always Usually Some imes Rarely Ne ver Not applicable DK, RF
Coverage.	Respondents who required routine or ongoing care in the past 12 months

AC_Q09	Thinking about the last time you required routine or ongoing care, where did you get that care?
01 02 03 04 05 06 07	Primary care provider (usual family physician or usual place of care) Walk-in clinic CLSC/Community health centre Emergency department Telephone help line Specialist's clinic Internet Another source DK, RF
Coverage:	Respondents who required routine or ongoing care in the past 12 months
AC_Q10	Thinking about the last time you received routine or ongoing care, how long did you have to wait between when you needed care and when you received care?
	INTERVIEWER: Enter number only.
	(3 spaces) [Min: 0 Max: 732]
	DK, RF(Go to AC_Q11A)
Coverage:	Respondents who required routine or ongoir ig vare in the past 12 months
AC_N10	Was this in hours, days, weeks, . onths or years?
AC_N10 1 2 3 4 5	Was this in hours, days, weeks, conths or years? Hours Days Weeks Months Years DK, RF
1 2 3 4	Hours Days Weeks Months Years
1 2 3 4 5	Hours Days Weeks Months Years DK, RF Respondents with required routine or ongoing care in the past 12 months In your view, was the waiting time? In Your View Read categories to respondent.
1 2 3 4 5	Hours Days Weeks Months Years DK, RF Respondante who required routine or ongoing care in the past 12 months In your view, was the waiting time?
1 2 3 4 5 5 Coverage: AC_Q11A	Hours Days Weeks Months Years DK, RF Respondents with required routine or ongoing care in the past 12 months In your riew, was the waiting time? In TERVIEWER: Read categories to respondent. Acceptable Somewhat acceptable Not very acceptable Not acceptable

AC_Q11B	In this particular case, what do you think would have been an acceptable waiting time?
	INTERVIEWER: Enter number only.
	(3 spaces) [Min: 0 Max: 732]
	DK, RF(Go to AC_R12)
Coverage:	Respondents who in the past 12 months had an unacceptable waiting time when they required routine or ongoing care
AC_N11B	Was this in hours, days, weeks, months or years?
1	Hours
2	Days
3	Weeks
4	Months
5	Years
5	i eais
Coverage:	Respondents who in the past 12 months had an unacceptable waiting time when they required routine or ongoing care
AC_R12	The next questions are about situations when you have needed immediate care for a minor health problem such as 'ever, headache, a sprained ankle, vomiting or an unexplained rash.
AC_Q12	In the past 12 months, have you required immediate health care services for a minor health problem?
1	Yes
2	
2	No
Coverage:	DK, RF(Go to AC_Q18) All respondents
AC Q13	In the past 12 months, did you ever experience any difficulties getting the
πο_αισ	immediate care needed for a minor health problem?
	mine diase sare needed for a minor nearth problem:
1	Yas
1 2	
	No(Go to AC_Q15)
	Or: RF(Go to AC_Q15)
Coverag	Respondents who required immediate care for a minor health problem in the past 12 months

AC_Q14	What types of difficulties did you experience?
	INTERVIEWER: Mark all that apply.
01 02 03 04 05 06 07 08 09 10 11 12	Difficulty contacting a physician Difficulty getting an appointment Do not have personal/family physician Waited too long to get an appointment Waited too long to see the physician (i.e., in-office waiting) Service not available at time required Service not available in the area Transportation problems Cost Language problems Did not know where to go (i.e., information problems) Unable to leave the house because of a health problem Other - Specify
Default:	(Go to AC_Q15)
Coverage:	Respondents who in the past 12 months experienced difficulties gotting the immediate care needed for a minor health problem
AC_S14	What type of difficulties did you experience:
	INTERVIEWER: Specify.
	(80 spaces)
AC_Q15	Thinking about the last time you required immediate care for a minor health problem, where did you get that care?
01 02 03 04 05 06 07 08	Primary care provider (usual family physician or usual place of care) Walk-in clini: CLSC/Community health centre Emerge any department Telephone help line Specialist's clinic Internet Another source DK, RF
Coverage.	Respondents who required immediate care for a minor health problem in the past 12 months
AC_Q16	Thinking about the last time you received immediate care for a minor health problem, how long did you have to wait between when you needed care and when you received care?
	INTERVIEWER: Enter number only.
	(3 spaces) [Min: 0 Max: 732]
	DK, RF(Go to AC_Q17A)
Coverage:	Respondents who required immediate care for a minor health problem in the past 12 months

AC_N16	Was this in hours, days, weeks, months or years?
1	Hours
2	Days
3	Weeks
4	Months
5	Years
	DK, RF
Coverage:	Respondents who required immediate care for a minor health problem in the past 12 months
AC_Q17A	In your view, was the waiting time?
	INTERVIEWER: Read categories to respondent.
1	Acceptable
2	Somewhat acceptable
3	Not very acceptable
4	Not acceptable
4	DK, RF
	DR, IN
Default:	(Go to AC_Q18)
Coverage:	Respondents who required immediate care for a min r heal a problem in the past 12 months
AC_Q17B	In this particular case, what do you think would have been an acceptable waiting time?
	INTERVIEWER: Enter number only.
	(3 spaces) [Min: 0 Max: 732]
	DK, RF(Go to AC_Q18)
Coverage:	Respondents y no in the past 12 months had an unacceptable waiting time when they required immediate care is a minor health problem
AC_N17B	Was his in nours, days, weeks, months or years?
1	heurs
2	Dayo
3	'Veoks
4	Nonths
5	Years
3	DK, RF
7	
Coverage:	Respondents who in the past 12 months had an unacceptable waiting time when they required immediate care for a minor health problem

AC_Q18	In the past 12 months, did you require a visit to a specialist for a diagnosis or a consultation?
1	Yes
2	No
Coverage:	All respondents
AC_Q19	In the past 12 months, did you ever experience any difficulties getting the specialist care you needed for a diagnosis or consultation?
1	Yes
2	No(Ca to AC_Q21)
	DK, RF(Go to \C_Q21)
Coverage:	Respondents who needed to visit a specialist for a diagnosis or a consultation in the past 12 months
AC_Q20	What type of difficulties did you experience?
	INTERVIEWER: Mark all that apply.
01	Difficulty contacting a physician
02	Difficulty getting an appointment
03	Do not have personal/family physician
04	Waited too long to get an appointmgn.
05 06	Waited too long to see the physician (i.e. in-office waiting) Service not available at time required
07	Service not available at time require service not available in the a rea
08	Transportation problems
09	Cost
10	Language problems
11 12	Did not know where 'າ ູາ (i.e., information problems) Unable to leave he house because of a health problem
13	Other - Specify(Go to AC_S20)
10	DK, RF
Default:	(Go τω AC_Q21)
Coverage:	Re ponderits who in the past 12 months experienced difficulties getting the specialist care they in securific a diagnosis or consultation
AC_S20	What type of difficulties did you experience?
X	INTERVIEWER: Specify.
	(80 spaces)

	-
AC_Q21	Thinking about the last time you received specialist care for a diagnosis or consultation, how long did you have to wait between when you needed care and when you received care?
	INTERVIEWER: Enter number only.
	(3 spaces) [Min: 0 Max: 732]
	DK, RF(Go to AC_Q22)
Coverage:	Respondents who needed to visit a specialist for a diagnosis or a consultation in the past 12 months
AC_N21	Was this in hours, days, weeks, months or years?
1 2 3 4 5	Hours Days Weeks Months Years DK, RF
Coverage:	Respondents who needed to visit a specialist for a diagnos. Consultation in the past 12 months
AC_Q22	During the past 12 months, was there e 'er a ime when you felt that you needed health care but you didn't rockive it?
1	Yes
2	No
Coverage:	All respondents
AC_Q23	Thinking of the most secent time, why didn't you get care?
	INTERVIEW ER: Mark all that apply.
01	Difficulty contacting a physician
02	Difficulty getting an appointment
03	Do not have personal family physician
04	ίνι ited too long to get an appointment
05	V'ancui too long to see the physician (i.e., in-office waiting)
06	Service not available at time required
07	Service not available in the area
08	Transportation problems Cost
09 10	Language problems
11	Did not know where to go (i.e., information problems)
12	Unable to leave the house because of a health problem
13	Other - Specify(Go to AC_S23) DK, RF
Default:	(Go to AC_END)
Coverage:	Respondents who during the past 12 months felt there was a time they needed health care but didn't receive it

AC_S23	Thinking of the most recent time, why didn't you get care?
	INTERVIEWER: Specify.
	(80 spaces)
AC_END	End of section
Section:	Emergency room use (ER)
ER_BEG	Beginning of section
ER_R01	The next questions are about accessing health care from a hospital emergency department over the past 12 months.
ER_Q01	How many times have you personally used a hospital emergency department in the past 12 months?
	INTERVIEWER: If never, enter 0.
	(3 spaces) [Min: 0 Max: 900] DK, RF
Coverage:	All respondents
ER_C02	If ER_Q01 = 0, DK, or RF(Go to ER_END) Otherwise(Go to ER_Q01A)
ER_Q01A	The last time you went to the nospital emergency department, what were the reasons you choos to go to Emergency?
	INTERVIEWER: Mar's all that apply.
01	It clearly was arcemergency
02	I didn't know it my health condition was an emergency
03 04	I was wearing to see a specialist but my health was deteriorating I was vaiting for a test or procedure and wanted it done sooner
05	I was told to go to the emergency department (e.g., by a health professional, for the purposes of follow-up, or for an appointment with a specialist who works there)
06 07	was the only place to go go to the emergency department whenever I need care
08	I use the emergency department for all my health concerns
09	Other - Specify(Go to ER_S01A) DK, RF
Default:	(Go to ER_Q02)
Coverage:	Respondents who have visited the hospital emergency department in the past 12 months

ER_S01A	The last time you went to the hospital emergency department, what were the reasons you chose to go to Emergency?
	INTERVIEWER: Specify.
	(80 spaces)
ER_Q02	The last time you went to the hospital emergency department, how long did you wait from the time you entered the emergency department to the time you were treated?
	INTERVIEWER: Enter number only.
	(3 spaces) [Min: 1 Max: 995] DK, RF
Coverage:	Respondents who have visited the hospital emergency department in the past 12 n onths
ER_N02	Was this in minutes, hours, or days?
1 2 3	Minutes Hours Days DK, RF
Coverage:	Respondents who have visited the hospital (in rigency department in the past 12 months
ER_Q03	The last time you went to the hospital emergency department, was it for a condition that you thought rould have been treated by your [primary care provider] if he had been available?
1 2	Yes No DK, RF
Coverage:	Respondents who have visited the hospital emergency department in the past 12 months
ER_END	End of section
Section:	Prescription medication use (MU)
MU_BEG	Reginning of section
MU_R0:	The next questions are about prescription medications you are currently using.
MU_Q01	How many different prescription medications are you taking on a regular or ongoing basis?
	INTERVIEWER: Enter amount.
	(3 spaces) [Min: 0 Max: 100] DK, RF
Coverage:	All respondents

MU_C02	If MU_Q01 = 0, DK, or RF
MU_Q02	In the past 12 months, how often have your medical doctors explained the side effects of any medication that was prescribed?
	INTERVIEWER: Read categories to respondent.
01 02 03 04 05 06	Always Often Sometimes Rarely Never Not applicable (long term use of the same medication, side effect discussion redundant) DK, RF
Coverage:	Respondents who are taking prescription medications on a regular or ong ning basis
MU_Q03	In the past 12 months, how often have your medical doctors reviewed and discussed all the different medications you are using, including medicines prescribed by other medical doctors?
	INTERVIEWER: Read categories to respendent.
01 02 03 04 05 06	Always Often Sometimes Rarely Never Not applicable (long-tyratuse of the same medication, side effect discussion redundant) DK, RF
Coverage:	Respondents who are taking prescription medications on a regular or ongoing basis
MU_Q04	In the past 12 months, have you had a side effect from a prescription that required you to visit a medical doctor or emergency room?
2	DK, RF
Coverage:	Respondents who are taking prescription medications on a regular or ongoing basis
MU_Q05A	In the past 12 months, have you ever been given the wrong medication or wrong dose by a doctor, nurse or pharmacist?
1 2	Yes(Go to MU_Q05B) No DK, RF
Default:	(Go to MU_END)
Coverage:	Respondents who are taking prescription medications on a regular or ongoing basis

MU_Q05B	Did this occur while you were hospitalized?
1 2	Yes No DK, RF
Coverage:	Respondents who in the past 12 months were given the wrong medication or wrong dose by a doctor, nurse or pharmacist
MU_Q06	Did this wrong medication or dose cause a?
	INTERVIEWER: Read categories to respondent.
1 2 3 4	Very serious health problem Somewhat serious health problem Not serious health problem No health problem at all DK, RF
Coverage:	Respondents who in the past 12 months were given the wrong mec cation or wrong dose by a doctor, nurse or pharmacist
MU_Q07	Did the medical doctor or health professional involved tell you that an error had been made in your treatment?
1 2	Yes No DK, RF
Coverage:	Respondents who in the past 12 mont, is were given the wrong medication or wrong dose by a doctor, nurse or pharmacist
MU_END	End of section
Section:	Chronic conditions (CC)
CC_BEG	Beginning of section
CC_R01AA	The following questions ask about chronic health conditions that you may have. We are interested in 'long-term conditions' which are expected to last or have already lasted 6 months or more and that have been diagnosed by a realth professional.
CC_QC1AA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	arthritis?
1 2	Yes(Go to CC_Q01AB) No DK, RF
Default:	(Go to CC_Q01BA)
Coverage:	All respondents

CC_Q01AB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01BA)
Coverage:	Respondents who were ever diagnosed or treated by a health professional for arthritis
CC_N01AB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for arthritis
CC_Q01BA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	asthma?
1 2	Yes(Go to CC_Q01BB) No DK, RF
Default:	(Go to CC_Q01CA)
Coverage:	All respondents
CC_Q01BB	How long ago were you first diagnosed with this condition?
	(2 spaces) Min: 0 Max: 99]
	DK, RF(Go to CC_Q01CA)
Coverage:	Respondents who were ever diagnosed or treated by a health professional for asthma
CC_N01BB	Was his in months or years?
1	ivi nths
	7k RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for asthma

CC_Q01CA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	chronic pain, diagnosed by a health professional?
1 2	Yes(Go to CC_Q01CB) No DK, RF
Default:	(Go to CC_Q01DA)
Coverage:	All respondents
CC_Q01CB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01DA)
Coverage:	Respondents who were ever diagnosed or treated by a health profersional for chronic pain
CC_N01CB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or casted by a health professional for chronic pain
CC_Q01DA	Has any health professional evel diagnosed you with or treated you for any of the following chronic health conditions:
	emphysema ດາ ີ O ໄປ (chronic obstructive pulmonary disease)?
	INTERVIEWER: In clude any disorder marked by a persistent obstruction of bronchial airflux in the lungs.
1 2	Yes
Default:	(Gc to CC_Q01EA)
Coverage.	All respondents
CC_Q01DB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01EA)
Coverage:	Respondents who were ever diagnosed or treated by a health professional for emphysema or COPD

CC_N01DB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for emphysema or COPD
CC_Q01EA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	cancer?
1 2	Yes(Go o CC_Q01EB) No DK, RF
Default:	(Go to CC_Q01FA)
Coverage:	All respondents
CC_Q01EB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01FA)
Coverage:	Respondents who were ever diagnosed or cated by a health professional for cancer
CC_N01EB	Was this in months or years:
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for cancer
CC_Q01FA	Has my hearth professional ever diagnosed you with or treated you for any of the rollowing chronic health conditions:
1 2	Ves
Default:	(Go to CC_Q01GA)
Coverage:	All respondents

CC_Q01FB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01GA)
Coverage:	Respondents who were ever diagnosed or treated by a health professional for depression
CC_N01FB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for depression.
CC_Q01GA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	a mood disorder other than depression, such as bipclar disorder, mania, manic depression, or dysthymia?
1 2	Yes(Go to CC_Q01GB) No DK, RF
Default:	(Go to CC_Q01HA)
Coverage:	All respondents
CC_Q01GB	How long ago were you \installarst diagnosed with this condition?
	(2 spaces)
Coverage:	Respondents who ware ever diagnosed or treated by a health professional for a mood disorder other than depression, such as bipolar disorder, mania, manic depression, or dysthymia
CC_N01GB	Was this in months or years?
1 2	Months Years OK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for a mood disorder other than depression, such as bipolar disorder, mania, manic depression, or dysthymia

CC_Q01HA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	diabetes?
	INTERVIEWER: Count borderline, any type.
1 2	Yes(Go to CC_Q01HB) No DK, RF
Default:	(Go to CC_Q01IA)
Coverage:	All respondents
CC_Q01HB	How long ago were you first diagnosed with this condition.
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01IA)
Coverage:	Respondents who were ever diagnosed or treated by a hearing assional for diabetes
CC_N01HB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for diabetes
CC_Q01IA	Has any health pro(escional ever diagnosed you with or treated you for any of the following chronic nealth conditions:
	heart disrase.
1 2	Yes(Go to CC_Q01IB) No DK, RF
Default:	(For CC_Q01JA)
Coverage:	All respondents
CC_Q01IE	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01JA)
Coverage:	Respondents who were ever diagnosed or treated by a health professional for heart disease

CC_N01IB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for heart disease
CC_Q01JA	Has any health professional ever diagnosed you with or treated you for any of the following chronic health conditions:
	stroke?
1 2	Yes
Default:	(Go to CC_Q01KA)
Coverage:	All respondents
CC_Q01JB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_Q01KA)
Coverage:	Respondents who were ever diagnosed or atted by a health professional for a stroke
CC_N01JB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for a stroke
CC_Q01KA	Has any hearth professional ever diagnosed you with or treated you for any of the allowing chronic health conditions:
	. nigh blood pressure or hypertension?
1 2	Yes(Go to CC_Q01KB) No DK, RF
Default:	(Go to CC_C02)
Coverage:	All respondents

CC_Q01KB	How long ago were you first diagnosed with this condition?
	(2 spaces) [Min: 0 Max: 99]
	DK, RF(Go to CC_C02)
Coverage:	Respondents who were ever diagnosed or treated by a health professional for high blood pressure or hypertension
CC_N01KB	Was this in months or years?
1 2	Months Years DK, RF
Coverage:	Respondents who were ever diagnosed or treated by a health professional for 'righ blood pressure or hypertension
CC_C02	If CC_Q01AA to CC_Q01KA not = 1
CC_R02A	Staying healthy can be difficult when you have a chronic health condition. We would like to learn about the type of help you get from your [primary care provider].
CC_Q02A	In the past 12 months, did you get the following tests or measurements to monitor your condition:
	blood pressure mea surement?
1 2	Yes No DK, RF
Coverage:	Respondents who have reported having diabetes, heart disease, stroke, high blood pressure or hypertention
CC_Q02B	In the past 12 months, did you get the following tests or measurements to monitor your condition: cholesterol measurement?
1 2	Yes No DK, RF
Coverage:	Respondents who have reported having diabetes, heart disease, stroke, high blood pressure or hypertension

CC_Q02C	In the past 12 months, did you get the following tests or measurements to monitor your condition:
	body weight measurement?
1 2	Yes No DK, RF
Coverage:	Respondents who have reported having diabetes, heart disease, stroke, high blood pressure or hypertension
CC_Q02D	In the past 12 months, did you get the following tests or measurements to monitor your condition:
	blood sugar measurement?
1 2	Yes No DK, RF
Coverage:	Respondents who have reported having diabetes, heart diabetes, high blood pressure or hypertension
CC_R03A	For the next set of questions, think a out the health care you've received for your chronic condition in the past 12 months from your [primary care provider].
Default:	(Go to CC_Q03)
CC_R03B	Staying healthy can be conscult when you have a chronic health condition. We would like to learn about the type of help you get from your [primary care provider].
	For the next set of guestions think about the health care you've received for your chronic condition in the past 12 months from your [primary care provider].
CC_Q03	In the past 12 months, were you asked to talk about your goals in caring for your chronic condition?
	'N_ERVIEWER: Read categories to respondent.
01 02 03 04 05 06	Almost always Most of the time Sometimes Generally not Almost never Not applicable, has not seen a doctor in the past 12 months DK, RF
Coverage:	Respondents with at least one chronic condition

CC_Q04	In the past 12 months, were you shown that what you did to take care of yourself influenced your health condition?
01 02	Almost always Most of the time
03	Sometimes
04	Generally not
05	Almost never
06	Not applicable, has not seen a doctor in the past 12 months DK, RF
Coverage:	Respondents with at least one chronic condition
CC_Q05	In the past 12 months, were you given a written list of things you should do to improve your health?
01	Almost always
02	Most of the time
03	Sometimes
04	Generally not
05	Almost never
06	Not applicable, has not seen a doctor in the past 12 months DK, RF
Coverage:	Respondents with at least one chronic conditio:
CC_Q06	In the past 12 months, were you encouraged to go to a specific group or class such as an educational section to help cope with your chronic condition?
01	Almost always
02	Most of the time
03	Sometimes
04	Generally not
05	Almost never
06	Not applicable, has not seen a doctor in the past 12 months DK, RF
Coverage:	Respondents with at least one chronic condition
CC_Q07	In the past 12 months, were you encouraged to attend programs in the community such as support groups or exercise classes that could help you?
01	Almost always
02	Most of the time
03	Sometimes
04	Generally not
05	Almost never
06	Not applicable, has not seen a doctor in the past 12 months DK, RF
Coverage:	Respondents with at least one chronic condition

CC_Q08	In the past 12 months, were you told how your visits with other types of doctors (e.g., specialists or surgeon) helped your treatment?
01	Almost always
02	Most of the time
03	Sometimes
04	Generally not
05	Almost never
06	Not applicable, has not seen a doctor in the past 12 months
00	DK, RF
Coverage:	Respondents with at least one chronic condition
CC_Q09	In the past 12 months, were you helped to make a treatment pinn that you could do in your daily life?
01	Almost always
02	Most of the time
03	Sometimes
03	
-	Generally not Almost never
05	
06	Didn't make a plan
07	Not applicable, has not seen a doctor in the part 12 months DK, RF
Coverage:	Respondents with at least one chronic cond'iic.
CC_END	End of section
Section:	Patient activation (PA)
PA_BEG	Beginning of section
PA_C01	If CC_Q01AA to CC_Q01KA not = 1(Go to PA_END) Otherwise, if a least one yes in CC_Q01AA to CC_Q1KA(Go to PA_R01)
PA_R01	The relowing questions are related to how involved you are in thinking about or making decisions about your own health and health care.
PA_Q01	I ∵now what each of my prescribed medications do. Do you?
	INTERVIEWER: Read categories to respondent.
1	Strongly agree
2	Agree
3	Disagree
4	Strongly disagree
•	DK, RF
	•
Coverage:	Respondents with at least one chronic condition

	~
PA_Q02	I am confident that I can follow through on medical treatments I need to do at home. Do you?
	INTERVIEWER: Read categories to respondent.
1	Strongly agree
2	Agree
3	Disagree
4	Strongly disagree
	DK, RF
Coverage:	Respondents with at least one chronic condition
PA_Q03	I understand the nature and causes of my health condition. Dayou?
1	Strongly agree
2	Agree
3	Disagree
4	Strongly disagree
	DK, RF
Coverage:	Respondents with at least one chronic condition
PA_Q04	I know the different medical treatment cotions available for my health condition. Do you?
1	Strongly agree
2	Agree
3	Disagree Strong sky disagree
4	Strongly disagree DK, RF
	DK, KF
Coverage:	Respondents with at /ea. * or > chronic condition
PA_Q05	I know how to prevent further problems with my health condition. Do
	you?
1	Strongly agree
2	Agree
3	Di. agree
4	C'rongiy disagree OK, RF
Coverage.	Respondents with at least one chronic condition
PA_END	End of section
Section:	Demographics (DM)
DM_BEG	Beginning of section
DM_R01	Now, I would like to ask you a few general questions that will help us analyze the data collected.

DM_B01	Call the Sex block.
Coverage:	All respondents
DM_B02	What is your date of birth?
	Call the Date block.
	INTERVIEWER: Insist on year of birth.
Coverage:	All respondents
DM_Q03	What is the highest grade or level of education you have ever reached?
01 02 03 04	No schooling Some elementary Completed elementary Some secondary
05 06 07 08	Completed secondary Some community college, technical college, CEGEP or nurse's training Completed community college, technical college, CEGEP or nurse's training Some university or teacher's college
09 10	Completed university or teacher's college Other education or training DK, RF
Coverage:	All respondents
DM_Q04	Which of the following describes you best?
	INTERVIEWER: Read categories to respondent.
01 02 03	Employed full-time (inc. iding self-employed or on a work training program) Employed part-time (ii cluding self-employed or on a work training program) Unemployed and cooking for work
04 05	At school or in full-time education Unable to work due to long-term sickness or disability
06 07	Looking after your home/family Retired from paid work
08	Other(Go to DM_S04)
Default:	(Go to DM_Q05)
Coverage:	All respondents
DM_S04	Which of the following describes you best?
	INTERVIEWER: Specify.
	(80 spaces)

DM_Q05 What is your best estimate of the total household income received by all household members, from all sources, before taxes and deductions, during the year ending Dec. 31, 2007?

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

____(8 spaces) [Min: 1 Max: 10]

DK, RF

Coverage: All respondents

DM_Q05A What is your best estimate of the total household inco.ne received by all household members, from all sources, before taxes and deductions, during

the year ending Dec. 31, 2007? Was it ...?

INTERVIEWER: Read categories to respondent.

1 Less than \$50,000 (includes income loss)

2 \$50,000 and more

DK, RF

Coverage: Respondents who did not provide an estimate of their total household income in DM_Q05

DM_Q05B Please stop n.e when I have read the category which applies to your house!...!

INTERV. WER: Read categories to respondent.

03 Lyss inan \$5,000

04 \ \\$5,000 or more but less than \$10,000 \ \\$10,000 or more but less than \$15,000 \ \\$6 \\$15,000 or more but less than \$20,000 \ \\$7 \\$20,000 or more but less than \$30,000 \ \\$30,000 or more but less than \$40,000 \ \\$40,000 or more but less than \$50,000 \ \\$6 \\$15,000 or more but less than \$40,000 \ \\$7 \\$8 \\$10,000 or more but less than \$50,000 \ \\$7 \\$10,000 or more but less

DK, RF

Default: (Go to DM_Q06)

Coverage: Respondents who did not provide an estimate of their total household income in DM_Q05 but

reported that it was less than \$50,000

DM_Q05C	Please stop me when I have read the category which applies to your household.	
	INTERVIEWER: Read categories to respondent.	
10 11 12 13 14 15	\$50,000 or more but less than \$60,000 \$60,000 or more but less than \$70,000 \$70,000 or more but less than \$80,000 \$80,000 or more but less than \$90,000 \$90,000 or more but less than \$100,000 \$100,000 or more but less than \$150,000 \$150,000 and over DK, RF	
Coverage:	Respondents who did not provide an estimate of their total household income in DM_Q05 לut reported that it was \$50,000 or more	
DM_Q06	Including yourself, how many persons usually live in your household?	
	(2 spaces) [Min: 1 Max: 99] DK, RF	
Coverage:	All respondents	
DM_Q07	In what province or territory do you (it 'e':	
10 11 12 13 24 35 46 47 48 59 60 61 62	Newfoundland and Labrador Prince Edward Island Nova Scotia New Brunswick Quebec Ontario Manitoba Saskatchewan Alberta British Cokumaa Yukon North vest Territories Nunavua Ori, RF	
Coverage:	1/1 i spondents	
DM_Qu? What is your postal code?		
Y	<u>INTERVIEWER</u> : Enter the postal code. If the address is outside Canada, press <enter>.</enter>	
	(6 spaces) DK, RF	
Coverage:	All respondents	
DM_END	End of section	

Section: Permission to share (PS) PS BEG Beginning of section To avoid duplication. Statistics Canada has entered into an agreement to **PS R01** share the information from the interviews conducted as part of this survey with the Canadian Institute of Health Information and the Health Council of Canada, Your name, address and telephone number will not be included and both organizations have undertaken to keep this information confidential and use it only for statistical purposes. INTERVIEWER: The survey is sponsored by the Health Council of Canada and the Canadian Institute for Health Information. **PS Q01** Do you agree to share the information provided? 1 Yes 2 No DK, RF Coverage: All respondents PS_END End of section Permission to link (PL) Section: PL BEG Beginning of section In 2007, you responded to use Canadian Community Health Survey. At that **PL R01** time, you gave us your permission to link your information from that survey, to your health services information. You also gave us your (provincial or territo iz health number to assist in linking this information.

Now, we would like your permission to link today's survey with your 2007 survey information, and with your health services information.

INTERVIEWED: Your health services information includes your past and continuing act of health services, such as visits to hospitals, clinics and doctor's offices. However, it does not include your personal medical information held by your doctor.

PL Q01 The linked information will not be shared with anyone outside Statistics Canada. Do we have your permission?

> INTERVIEWER: The linked information will not be shared with the Canadian Institute for Health Information or with the Health Council of Canada.

1 Yes......(Go to PL END) 2 No

DK, RF

Coverage: Respondents who gave permission to link their CCHS 2007 information to their health services

information

PL_R02 Finally, we would like your permission to link information collected during this interview to your past survey answers to the Canadian Community Health Survey collected in 2007 by Statistics Canada. **PL Q02** This linked information will be kept confidential and used only for statistical purposes by Statistics Canada and will not be shared with the Canadian Institute for Health Information or with the Health Council of Canada. Do we have your permission? 1 Yes 2 No DK, RF Respondents who did not give permission to link their CCHS 2007 information to their health services Coverage: information, and respondents who gave permission to link their CCHS 2007 information is their health services information but did not give permission to link to this survey PL END End of section

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	-	_Q07 _Q08A	
EP_Q051 EP_Q06	_	_Q08B	
= <		_Q08B _Q09	
EP_Q07		_	
EP_Q08	-	_Q10	
EP_Q09		_R01	
EP_R01		I DEC	22
ER_BEG		J_BEG	
ER_C022	zı MU	J_C02	

MU_END24	PA_R0134
MU_Q0122	PL_BEG39
MU_Q0223	PL_END40
MU_Q0323	PL_Q0139
MU_Q0423	PL_Q0240
MU_Q05A23	PL_R01 39
MU_Q05B24	PL_R02 40
MU_Q0624	PS_BEG39
MU_Q0724	PS_END39
MU_R0122	PS_Q0139
P	PS_R0139
PA_BEG34	PS_R01
PA_C0134	PT END 2
PA_END35	PT_Q01
PA_Q0134	PT_Q022
PA_Q0235	PT_Q032
PA_Q0335	PT_Q042
PA_Q0435	PT_Q052
PA_Q0535	PT_R011