

**Accessibility and continuity of health services:
A study on primary care in Québec**

Population questionnaire

April 2006

Institut national de santé publique du Québec
Direction de santé publique, Agence de la santé et des services sociaux de Montréal
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FUNDING AGENCIES

The research project benefits from an operational grant from the Canadian Institutes for Health Research (CIHR, the Canadian Health Services Research Foundation (CHSRF) and the Fonds de la Recherche en Santé du Québec (FRSQ). The project also benefits from financial support from the Agences de la santé et des services sociaux (ASSS) of Montréal and Montérégie, the Institut national de santé publique du Québec (INSPQ), from the Groupe de recherche sur l'équité d'accès et l'organisation des services de santé de 1re ligne (Gréas 1) and the Groupe interuniversitaire de recherche sur les urgences (GIRU).

This project has received an ethical approval from the Comité d'éthique de la recherche de la Direction de santé publique, Agence de la santé et des services sociaux de Montréal.

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Components of the questionnaire

Section A: Health services utilisation over the last two years

Utilisation profile

Section B: Primary care experience with the usual source of care over the last two years (including hospital emergency rooms)

Characteristics of the usual source of care

Utilisation profile and access to services offered by the usual source of care

Assessment: accessibility, continuity, comprehensiveness, responsiveness

Perceived results of services / usual source of care

Section C: Recent care experience (last six months)

Health services utilisation over the last six months

Reason for utilisation

Characteristics of the recent source of care and process of care

Emergency care

Perceived results of services / recent source of care

Section D: Needs not met by services

Section E: Characteristics of respondents

Health status

Sociodemographic characteristics

Section A: Health services utilisation over the last two years

Utilisation profile

A1 In the last two years, therefore since 2003, were you hospitalised, that is did you spend at least one night in the hospital?

- ₁ Yes
₂ No → **Go to question A2**
₉₅ Does Not Know / Does Not Remember → **Go to question A2**

A1a In the last two years, how many times were you hospitalised?

- ₁ Once
₂ Twice
₃ 3 times
₄ 4 times
₅ 5 times
₆ 6 times or more
₉₅ Does not know /DNR

A2 In the last two years, did you go to a hospital emergency room to get medical care?

- ₁ Yes
₂ No → **Go to question A3**
₉₅ Does Not Know / Does Not Remember → **Go to question A3**

A2a In the last two years, how many times did you go to an emergency room?

- ₁ 1
₂ 2
₃ 3
₄ 4
₅ 5
₆ 6
₇ 7
₈ 8
₉ 9
₁₀ 10 times or more
₉₅ Does not know /DNR

A3 In the last two years, did you go to a CLSC to see a doctor?

- ₁ Yes
₂ No
₉₅ Does Not Know / Does Not Remember

A4 In the last two years, did you go to a doctor's office or medical clinic to see a doctor (other than the CLSC)? including regular check-ups and follow-ups

- ₁ Yes
₂ No
₃ At home or at work
₉₅ Does Not Know / Does Not Remember

A1.1 Do you have a family doctor?

- ₁ Yes → **Go to section B**
₂ No
₉₅ Does Not Know / Does Not Remember

A1.2 Why don't you have a family doctor? Is it because...

- 1 You don't need one or you never tried to have/get one
- 2 No doctor takes new patients in your region, there are no available doctors, it is too hard to find a family doctor or to get appointments
- 3 You had one that left or retired or you moved and lost your family doctor
- 4 You go to a clinic and see any doctor, it is not important to have one doctor in particular
- 90 Other → *Specify* _____
- 95 Does Not Know / Does Not Remember



Note: If A2 or A3 or A4 = 1, go to section B; if ≠ 1, go to section D.



Section B: Recent care experience (last six months)

Characteristics of the usual source of care

The next questions refer to the place you usually go or the doctor you usually see when you need medical care. All information is anonymous and confidential, and no personal information will be given to a clinic or doctor.

B1 In the last two years, where did you usually go to see a doctor for your general medical care, excluding specialised care?

(If the respondent reports not having a usual source of care, ask the following question): **Over the last two years, can you tell me the name of the place where you have been most frequently for your general medical care?** (at least once) In case of multiple answers, select the most important for the respondent. As a last resort, select the most recent place.

- 1 To a clinic or doctor's office (not in a CLSC): ("family medicine groups" (GMF), polyclinics, "family medicine units" (UMF), "family medicine clinics" (FMC), " clinic in a university) → *Go to question B1A1*
- 2 At a CLSC → *Go to question B1B1*
- 3 Hospital emergency → *Go to question B1C1*
- 5 Doctor or clinic located in a residence for autonomous seniors
- 91 Home care → *Go to section C*
- 92 A hospital's ambulatory care or outpatient clinic → *Go to section C*
- 93 Respondent who is followed by a specialist only and does not have a family doctor or general practitioner → *Go to section C*
- 94 Outside Montréal or Montérégie → *Go to section C*
- 90 Other → *Specify* _____ → *Go to section D*
- 95 Does Not Know / Does Not Remember → *Go to section D*
- 97 Refused → *Go to section D*

B1A1 Clinic identification: _____

→ *Go to question B2*

B1B1 CLSC identification: _____

→ *Go to question B2*

B1C1 Hospital identification: _____

→ *Go to questions A4, B5, B5.1, B17, B24, B25, B26, B27, B28, B28a & Section C*

B1D1 Residence identification: _____

→ *Go to question B2*

We are now going to talk only about the “*Name of the source of care*” to get a better idea of the services available.

**B2 How long have you been going to this place?
If only one visit, is it...?**

- ₁ Less than 6 months ₅ 3 to 5 years
₂ 6 months to less than a year ₆ More than 5 years
₃ 1 year to less than 2 years ₉₅ Does not know
₄ 2 years to less than 3 years

B3 In the last 2 years, about how many times did you go to this place for your own health needs?

- ₁ Once ₄ More than 10 times
₂ 2 to 5 times ₉₅ Does not know
₃ 6 to 9 times

B4 At this place, is there a particular doctor who is mostly responsible for your care ?

- ₁ Yes
₂ No → *Go to question B5.1*
₉₅ Does not know → *Go to question BA5.5*

B5 Do you consider this doctor to be your family doctor?

- ₁ Yes
₂ No
₉₅ Does Not Know / Does Not Remember

B5.1 Are there other doctors practising at this place (address)?

- ₁ Yes
₂ No
₉₅ Does Not Know

Utilisation profile and access to services offered by the usual source of care

	For each of the following statements, to the best of your knowledge, tell me if the statement applies always, often, sometimes or never at the “<i>Name of the source of care</i>” where you usually go for health care.	Always	Often	Some-times	Never	Does not know
B6	At this place, if your doctor is not available (doctor who is responsible for your care), you can see another doctor	1	2	3	4	95
B8	If you need to see a doctor for a new health problem, you go to this place first	1	2	3	4	95
B9	If you need to see a doctor on the same day for a health problem such as fever or a slight accident, you go to this place first	1	2	3	4	95
B10	When you consult a doctor at this place, you go directly there without making an appointment	1	2	3	4	95
B11	If you decide to without making an appointment, you call first to know which doctors are at the clinic	1	2	3	4	95

B13 In your opinion, is there a nurse working at this clinic?

- ₁ Yes
- ₂ No
- ₉₅ Does Not Know / Does Not Remember

B14 When you need to see a doctor at this place, in general, how long does it take before you can get an appointment to see the doctor?

- ₁ Less than 2 days
- ₂ 2 to 7 days
- ₃ More than 7 days and up to 2 weeks
- ₄ More than 2 weeks and up to 4 weeks
- ₅ More than 4 weeks and up to 8 weeks
- ₆ More than 8 weeks
- ₇ Never makes an appointment (Always goes to the walk-in clinic) → **Go to question B17**
- ₈ Always goes with a pre-scheduled appointment (routine follow-up) → **Go to question B15**
- ₉₅ Does not know → **Go to question B17**

B14A Do you consider this waiting time acceptable?

- ₁ Yes
- ₂ No
- ₉₅ Does Not Know

B15 When you are at this place, in general, how much time do you have to wait between the scheduled time of appointment and the time you actually see the doctor?

- ₁ Less than 15 minutes
- ₂ 15 to 29 minutes
- ₃ 30 to 44 minutes
- ₄ 45 to 59 minutes
- ₅ 60 to 74 minutes (an hour to an hour and 14 minutes)
- ₆ 75 to 89 minutes (an hour and a quarter to an hour and 29 minutes)
- ₇ An hour and a half or more
- ₉₅ Does not know → **Go to question B17**

B15a Do you consider this waiting time acceptable?

- ₁ Yes
- ₂ No
- ₉₅ Does Not Know

B17 How long does it usually take you to get there?

- ₁ Less than 15 minutes
- ₂ 15 to 30 minutes
- ₃ More than 30 minutes
- ₉₅ Does not know

Assessment: Accessibility

	When you go to the “Name of the source of care”, tell me if the following statements apply always, often, sometimes or never.	Always	Often	Some-times	Never	Does not know
B24	When you go to this place, you see the same doctor	1	2	3	4	95
B25	When you go to this place, you lose income or study time, or you miss classes	1	2	3	4	95
B26	When you go to this place, you have to pay for laboratory or radiology tests done on site or somewhere else (e.g., blood tests, X-ray, scan, mammography, etc.)	1	2	3	4	95
B27	When you go to this place, you have to pay for OTHER doctor’s services not covered by the Régie de l’assurance-maladie or not reimbursed by your personal health insurance plan (for example to get the doctor to fill out a form for you)	1	2	3	4	95

B28 When you go to this place, you have to pay for drugs given on-site or medical supplies like bandages, syringes, etc. (For example, eye drops, local anesthetics, etc.)

- ₁ Always ₄ Never → **Go to question B30**
 ₂ Often ₉₅ Does not know → **Go to question B30**
 ₃ Sometimes

B28a Do you find these expensive?

- ₁ Yes
 ₂ No
 ₉₅ Does Not Know

Assessment: Continuity, comprehensiveness

Now we would like to know if you have been referred to other services.

B30 In the last 2 years, did a doctor at the “Name of the source of care” prescribe laboratory tests for you (such as blood or urine tests), or radiological exams (such as X-ray, mammography or ultrasound)? (Radiological exams also include: scanner, magnetic resonance, Doppler, scintigraphy, colonoscopy, etc.)

- ₁ Yes
 ₂ No → **Go to question B36**
 ₉₅ Does not know → **Go to question B36**

B30a Did you undergo these tests or exams?

- ₁ Yes
 ₂ No → **Go to question B36**
 ₉₅ Does not know → **Go to question B36**

	Regarding these tests or exams, tell me if the following statements apply always, often, sometimes or never.	Always	Often	Some-times	Never	Does not know	Did not get his/her results
B31	Someone at the “ <i>Name of the source of care</i> ” helped you make an appointment for these tests or exams	1	2	3	4	95	
B32	The waiting time between your visits to the doctor and the moment you underwent these tests or exams was adequate	1	2	3	4	95	
B34	Someone telephoned you or met with you to give you the results of these tests or exams	1	2	3	4	95	96
B33	The waiting time between the moment you underwent these tests or exams and the moment you got the results was adequate	1	2	3	4	95	
B35	You were given clear explanations about the results of your tests or exams	1	2	3	4	95	

B36 In the last 2 years, did a doctor from the “Name of the source of care” refer you to one or several medical specialists or to another general practitioner?

- ₁ Yes
 ₂ No → **Go to question B18**
 ₉₅ Does not know → **Go to question B18**

B36a Did you see one or several specialists or another general practitioner?

- ₁ Yes
 ₂ No → **Go to question B18**
 ₉₅ Does not know → **Go to question B18**

	Regarding your visits to the specialist(s) (or another general practitioner), tell me if, in general, the following statements apply always, often, sometimes or never.	Always	Often	Some-times	Never	Does not know
B37	Someone from the “ <i>Name of the source of care</i> ” helped you make your appointment with the specialist(s)	1	2	3	4	95
B38	The waiting time between your visits to the doctor who referred you and the moment you met the specialist(s) was adequate	1	2	3	4	95
B40	You are the one who informed your doctor of the results of your visits to the specialist(s)	1	2	3	4	95
B41	After you saw the specialist(s) (or another general practitioner), a doctor at the “ <i>Name of the source of care</i> ” discussed the report with you	1	2	3	4	95

Assessment: Accessibility (cont'd)

We would now like to know your opinion about how ACCESSIBLE the “*Name of the source of care*” is.

	For each of the following statements tell me if you agree strongly, somewhat, a little or not at all.	Strongly	Some-what	A little	Not at all	Does not know
B18	The “ <i>Name of the source of care</i> ” is conveniently located	1	2	3	4	95
B19	The office hours are convenient	1	2	3	4	95
B20	It is easy to reach someone at this place by telephone to make an appointment	1	2	3	4	95
B21	It is easy to talk to a doctor or nurse by telephone when this place is open	1	2	3	4	95
B22	It is easy to talk to a doctor or nurse by telephone when this place is closed	1	2	3	4	95
B23	It is easy to enter the building where the clinic is located (stairs, elevator, access ramp, etc.)	1	2	3	4	95

Assessment: Continuity, comprehensiveness (cont'd)

	Still keeping in mind your experiences over the last two years, tell me if you agree strongly, somewhat, a little or not at all with each of the following statements. At this place...	Strongly	Some-what	A little	Not at all	Does not know
B42	all your health problems are taken care of, whether they are physical or psychological	1	2	3	4	95
B43	during your visits, the doctor takes the time to talk to you about prevention and asks you about your lifestyle habits	1	2	3	4	95
B44	you get help for all the health care services you need	1	2	3	4	95
B47	your medical history is known	1	2	3	4	95
B48	the clinic professionals are aware of all the prescription medications you take	1	2	3	4	95
B50	you can get routine ongoing care for a chronic problem, for example, for high blood pressure (hypertension), diabetes or back pain, etc.	1	2	3	4	95

Assessment: Responsiveness of the usual source of care

Now we would like to know what you think about the human aspects of the health care you receive at the "**Name of the source of care**".

	In light of your experiences over the last two years, tell me if you agree strongly, somewhat, a little or not at all with each of the following statements: At this place...	Strongly	Some-what	A little	Not at all	Does not know
B51	your questions are answered clearly (All the clinic staff)	1	2	3	4	95
B52	your medical record is kept confidential	1	2	3	4	95
B53	your opinion and what you want are taken into account in the care that you receive	1	2	3	4	95
B54	you are given help to weigh the pros and cons when you have to make decisions about your health	1	2	3	4	95
B55	you feel respected	1	2	3	4	95
B56	you are greeted courteously at the reception	1	2	3	4	95
B57	your physical privacy is respected	1	2	3	4	95
B58	the doctors spend enough time with you	1	2	3	4	95
B59	you can get services in the language of your choice	1	2	3	4	95
B61	the premises are pleasant	1	2	3	4	95

Perceived results of services / usual source of care

Now we would like to ask you the degree to which the care provided at the "**Name of the source of care**" helps improve or maintain your health and well being.

	Keeping in mind the services and care you have received there, tell me if you agree strongly, somewhat, a little or not at all with each of the following statements:	Strongly	Some-what	A little	Not at all	Does not know
B62	The services you get there help you better understand your health problems	1	2	3	4	95
B63	The services you get there help you prevent certain health problems before they develop	1	2	3	4	95
B64	The services you get there help you control your health problems	1	2	3	4	95
B66	The professionals you see there encourage you to follow the treatments prescribed	1	2	3	4	95
B67	The professionals you see there help motivate you to adopt good lifestyle habits like quitting smoking, eating better, etc.	1	2	3	4	95



Section C: Recent care experience (last six months)

Health care utilisation

The next questions are about the health problems you have had in the LAST SIX MONTHS and the health services you used to deal with them.

In the last 6 months, did you consult a doctor other than a specialist...

- C1A** At a medical clinic or doctor's office? ₁ Yes ₂ No ₉₅ Does not know
- C1B** At a CLSC? ₁ Yes ₂ No ₉₅ Does not know
- C1C** At a hospital emergency room? ₁ Yes ₂ No ₉₅ Does not know



Note: If C1A and C1B and C1C ≠ 1, go to SECTION D.

Reasons for utilisation

C2 For what reason did you see a doctor? Was it...

(If more than one problem, ask them to identify the one they think is the most important)

- ₁ For an urgent health problem → **Go to question C2.1**
- ₂ For a non-urgent health problem → **Go to question C2.1**
- ₃ To have routine exams → **Go to section D**
- ₅ To get results from tests, exams, or from a consultation with a specialist → **Go to section D**
- ₇ To have a form filled out → **Go to section D**
- ₉₀ Other reason → **Specify** _____ → **Go to section D**

C2.1 Was this a known problem or was it a new problem? Known by the respondent himself.

- ₁ Known problem
- ₂ New problem

	Tell me if each of the following statements applies a lot, moderately, slightly or not at all.	A lot	Moderately	Slightly	Not at all	Does not know
C3	Was this problem causing you pain?	1	2	3	4	95
C4	Was this problem or illness threatening your health?	1	2	3	4	95
C5	Were you afraid of having complications if this problem was not treated rapidly?	1	2	3	4	95
C6	Was the problem for which you consulted limiting your activities?	1	2	3	4	95

Characteristics of the recent source of care

C7 Where did you consult for this problem exactly? If more than one: **Which one was your main or principal care provider for this health problem?**

- ₄ At the same place as identified previously → **Go to question C8**
- ₁ In another CLINIC or doctor's office (not a CLSC): (including GMF «Groupes de médecine de famille» or FMG «Family Medicine Groups», polyclinic, UMF «unité de médecine familiale» or «family medicine unit», FMC «family medicine clinic», clinic in university) → **Go to question C7A1A**
- ₂ In another CLSC → **Go to question C7A2A**
- ₃ In another emergency room → **Go to question C7A3**
- ₅ Another residence for autonomous seniors (Doctor or clinic) → **Go to question C7.1**
- ₉₁ Home care → **Go to section D**
- ₉₂ Outpatient consultation or ambulatory care clinic from an hospital → **Go to section D**
- ₉₀ Other → **Specify** _____ → **Go to section D**
- ₉₃ Respondent says that he/she is followed by a specialist and does not have a family doctor → **Go to section D**
- ₉₄ Outside Montréal or Montérégie → **Go to section D**
- ₉₅ Does Not Know / Does Not Remember → **Go to section D**
- ₉₇ Refused->D1

C7A1A Clinic identification: _____
→ **Go to question C7.1**

C7A2A CLSC identification: _____
→ **Go to question C7.1**

C7A3 Hospital identification: _____
→ **Go to question C7.1**

In the next questions, I will refer to the place you go to see a doctor. I will refer to this place by using the following terms...? "**Name of the source of care**".

C7.1 Why didn't you go to the "your usual source of care"? Is it because...?

- ₁ The office hours during which you could see a doctor did not suit you
- ₂ It was not possible to see your doctor or any doctor rapidly at this place
- ₃ You needed services or care that you could not obtain at this place, for example, a radiography
- ₄ The clinic moved or closed down, or your doctor is not available (retired, deceased, sick), or you have moved
- ₅ You wanted to change doctor or clinic
- ₉₀ Other → **Specify** _____
- ₉₅ Does Not Know / Does Not Remember

C8 Before going there, did you call Info Santé?

- ₁ Yes
- ₂ No → **Go to question C9**
- ₉₅ Does Not Know / Does Not Remember → **Go to question C9**

C8a What did they recommend?

- ₁ To go to a hospital emergency room
- ₂ To see a doctor in a walk-in clinic
- ₃ To make an appointment with a doctor
- ₉₀ Other → **Specify** _____

Emergency care



Note: Ask questions C9 to C18 if C7 = emergency.

C9 Did you get to the emergency room by ambulance?

- ₁ Yes → **Go to question C12**
- ₂ No
- ₉₅ Does not know

C10 Did you consult a doctor before going to the emergency room?

- ₁ Yes
- ₂ No → **Go to question C12**
- ₉₅ Does not know → **Go to question C12**

C11 Did the doctor you talked to recommend you go to the emergency room?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

C12 How long in total did you stay at the emergency room?

- ₁ A day or less
- ₂ More than a day
- ₉₅ Does not know / does not remember

C13 Were you hospitalised after your visit to the emergency room?

- ₁ Yes
- ₂ No

Think about the reasons for which you went to the emergency room. Now tell me if you agree strongly, somewhat, a little or not at all with each of the following statements:

	You went to the emergency room...	Strongly	Some-what	A little	Not at all	Does not know
C14	Because the walk-in clinics in your neighbourhood were not open at the time you needed care	1	2	3	4	95
C15	Because it was impossible to obtain services at the " Name of the usual source of care ", who is looking after your health problem	1	2	3	4	95
C16	So you could see a specialist within a reasonable time	1	2	3	4	95
C17	So you could have the tests you needed within a reasonable time	1	2	3	4	95
C18	Because they have all the services needed at the emergency room to look after your health problem	1	2	3	4	95

C19 During this consultation, did you see the doctor who is in charge of your health care?

- ₁ Yes → **Go to section D**
 ₂ No
 ₉₆ Do not apply

C20 Who did you see for your health care needs? Choose one answer only

- ₁ A general practitioner
 ₂ A specialist
 ₃ A general practitioner and specialist(s)
 ₄ Did not see anyone, left before being seen
 ₅ A medical student (a resident or extern)
 ₉₅ Does not know/ does not remember

Assessment: Perceived results of services / recent source of care

We would now like to know what you think about the services you were given there.

	Tell me if you agree strongly, somewhat, a little or not at all with each of the following statements:	Strongly	Some-what	A little	Not at all	Does not know
C21	The services received at the " Name of the recent source of care " helped you control the health problems for which you consulted	1	2	3	4	95
C22	The services received allowed you to continue or resume your daily activities	1	2	3	4	95
C23	The professionals you met helped you better understand your health problem(s)	1	2	3	4	95
C24	The professionals you met encouraged you to follow the prescribed treatments	1	2	3	4	95
C25	Overall, your needs were met concerning your health problem	1	2	3	4	95

Section D: Needs not met by services

The next questions are about the health services you needed but did not get.

D1 During the last 6 months, did you feel you needed to see a doctor for a health problem but didn't see one?

- ₁ Yes
₂ No → **Go to section E**
₉₅ Does not know → **Go to section E**

D2 For what reason did you want to see a doctor? Was it...

- ₁ For an urgent health problem
₂ For a non-urgent health problem
₃ To have routine exams → **Go to question D8**
₅ To get results from tests, exams, or a consultation with a specialist → **Go to question D8**
₇ To have a form filled out → **Go to question D8**
₉₀ Other reason → **Specify** _____ → **Go to question D8**

D2.1 Was this a known problem or was it a new problem?

Known by the respondent himself

- ₁ Known problem
₂ New problem

D3 Do you still have this problem?

- ₁ Yes
₂ No
₉₅ Does not know

	Tell me if the following questions apply a lot, moderately, slightly or not at all.	A lot	Moderately	Slightly	Not at all	Does not know	Does not apply
D4	Was this problem causing you pain?	1	2	3	4	95	96
D5	Was this problem threatening your health?	1	2	3	4	95	96
D6	Were you afraid of having complications if this problem was not treated quickly?	1	2	3	4	95	96
D7	Was the problem for which you wanted to consult limiting your activities?	1	2	3	4	95	96

What were the reasons you did not see a doctor? Was it because...

D8 You have an appointment but have not seen the doctor yet

- ₁ Yes → **Go to question D20**
₂ No
₉₅ Does not know

D9 You didn't know where to go to see a doctor

- ₁ Yes
₂ No
₉₅ Does not know

D10 You couldn't get an appointment

- 1 Yes
- 2 No
- 95 Does not know

D11 You couldn't move around to actually go see a doctor

- 1 Yes
- 2 No
- 95 Does not know

D12 You couldn't find a doctor who is taking new patients

- 1 Yes
- 2 No
- 95 Does not know

D13 Your usual doctor wasn't available at the time you needed him or her

- 1 Yes
- 2 No
- 95 Does not know

D14 The waiting time before seeing a doctor was too long

- 1 Yes
- 2 No
- 95 Does not know

D15 The office hours during which you could see a doctor did not suit you

- 1 Yes
- 2 No
- 95 Does not know

D19 Your health status deteriorated too much so you could not go see your doctor

- 1 Yes
- 2 No
- 95 Does not know

	Still thinking about the problem for which you wanted to see a doctor, tell me if you agree strongly, somewhat, a little or not at all with each of the following statements: Since the problem appeared...	Strongly	Some-what	A little	Not at all	Does not know
D20	Your health has worsened	1	2	3	4	95
D21	This situation caused you to feel worried, stressed or anxious	1	2	3	4	95
D22	This situation caused some of your family members and friends to feel worried, stressed or anxious	1	2	3	4	95
D23	You were bothered by the pain	1	2	3	4	95
D24	You had difficulty doing your daily activities	1	2	3	4	95
D25	This situation had negative consequences on other aspects of your life	1	2	3	4	95
D26	You lost some income	1	2	3	4	95
D27	This situation made you dependent on family members or friends	1	2	3	4	95
D28	You still have not succeeded in managing your health problem.	1	2	3	4	95



Section E: Characteristics of respondents

Health status

E1 In general, would you say your health is...

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> 1 Excellent | <input type="checkbox"/> 4 Average |
| <input type="checkbox"/> 2 Very good | <input type="checkbox"/> 5 Poor |
| <input type="checkbox"/> 3 Good | <input type="checkbox"/> 95 Does not know |

E2 Compared to last year, would you say your health now is... than last year?

- | | |
|--|---|
| <input type="checkbox"/> 1 Much better | <input type="checkbox"/> 4 Slightly worse |
| <input type="checkbox"/> 2 Slightly better | <input type="checkbox"/> 5 Much worse |
| <input type="checkbox"/> 3 About the same | <input type="checkbox"/> 95 Does not know |

E5 Considering that I have to ask different questions to men and women, can I please confirm that you are a...

- 1 Male
 2 Female

E6 How old are you?

The next questions are about various health problems. We would like to remind you that this information is going to be treated anonymously.

E3a Has a doctor ever told you that you HAVE high blood pressure? (hypertension)

- ₁ Yes
- ₂ No → *Go to question E3b*
- ₉₅ Does not know → *Go to question E3b*

E3a1 Do you take prescription drugs for high blood pressure?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

E3b Has a doctor ever told you that you HAVE diabetes (sugar in the blood or urine)?

- ₁ Yes
- ₂ No → *Go to question E3c*
- ₉₅ Does not know → *Go to question E3c*

E3b1 Do you take prescription drugs for diabetes?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

E3c Has a doctor ever told you that you HAVE high cholesterol?

- ₁ Yes
- ₂ No → *Go to question E3d*
- ₉₅ Does not know → *Go to question E3d*

E3c1 Do you take prescription drugs to lower your cholesterol?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

Has a doctor ever told you that you HAVE...

E3d A heart disease or cardiac problems (angina, arrhythmia, heart surgery...)?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

E3e Blood circulation problems?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

E3f Respiratory or lung problems? (asthma, emphysema, bronchitis, pneumonia)

- ₁ Yes
- ₂ No
- ₉₅ Does not know

E3g Rheumatism, arthritis or arthrosis?

- ₁ Yes
₂ No
₉₅ Does not know

E3h Skin problems like eczema, psoriasis, urticaria or hives?

- ₁ Yes
₂ No
₉₅ Does not know

E3i Severe back problems?

- ₁ Yes
₂ No
₉₅ Does not know

Have you ever had a...

E3j Cerebral vascular accident such as a thrombosis or stroke?

- ₁ Yes
₂ No
₉₅ Does not know

E3k Bladder problems, kidney problems (men only: or prostate problems)?

- ₁ Yes
₂ No
₉₅ Does not know

E3l Glaucoma (eye disease)?

- ₁ Yes
₂ No
₉₅ Does not know

E3m Have you ever suffered from depression or burn-out?

- ₁ Yes
₂ No
₉₅ Does not know

E3n Have you ever suffered from psychological problems (psychiatric) or from anxiety?

- ₁ Yes
₂ No
₉₅ Does not know

E3o Have you ever suffered from serious/severe stomach problems? (ulcer)

- ₁ Yes
₂ No
₉₅ Does not know

E3p Have you ever had a tumour or cancer? If yes, specify the type of cancer, e.g., lung, blood, prostate, kidney, etc.)

- ₁ Yes → *Specify* _____
₂ No
₉₅ Does not know



Note: Ask question E3Q only to women (E5 = 2).

E3q Have you had hysterectomy (having your uterus removed)?

- ₁ Yes
- ₂ No
- ₉₅ Does not know / does not remember

E3r Are you pregnant?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

E3s Do you have other serious health problems (other than those we discussed earlier) ?

- ₁ Yes
- ₂ No
- ₉₅ Does not know

Sociodemographic characteristics

Now I have a few questions that will serve to classify your answers.

E7 Were you born...

- ₁ In Québec → **Go to question E8**
- ₂ In another Canadian province → **Go to question E8**

E7aut In which country were you born?

- ₉₀ Other → **Specify** _____
- ₉₅ Does not know

E7B In what year did you come to live in Canada?

E8 What language do you speak most often at home?

- ₁ French
- ₂ English
- ₉₀ Other → **Specify** _____

E9 What is the highest diploma, certificate or degree that you have completed? Read if necessary

- 1 None
- 2 High school diploma or equivalent (D.E.S. diplôme d'études secondaires)
- 3 Vocational or trade school certificate or diploma (D.E.P. diplôme d'études professionnelles)
- 4 Community college or cegep certificate or diploma (other non-university certificate or diploma obtained from a cegep, community college, technical institute, etc.)
- 5 University certificate or diploma (not a bachelor's degree)
- 6 Bachelor's degree (e.g., B.A., B.Sc., LL.B.)
- 7 University certificate or diploma above a bachelor's degree
- 8 Master's degree (e.g., M.A., M.Sc., M.Ed.)
- 9 Medical diploma in dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.M.V., O.D.)
- 10 Doctoral degree obtained (e.g., Ph.D., D.Sc., D.Ed.)
- 90 Other → *Specify* _____

E10 In the last 6 months, what was your regular occupation?

- 1 Was working full time
- 10 Was working part time
- 2 Attending school full time
- 3 Was looking for work
- 4 Retired
- 5 Not working due to health reasons
- 6 Kept house
- 7 On maternity leave
- 8 On holidays
- 90 Other → *Specify* _____
- 95 Does not know

There is a significant link between health and income. We would appreciate it if you could answer the following questions so we can study this situation.

E12 What was the total (gross) income of your household? (household excludes roomates)

- 1 Less than \$15,000
- 2 between \$15,000 and \$25,000
- 3 between \$25,000 and \$35,000
- 4 between \$35,000 and \$55,000
- 5 between \$55,000 and \$75,000
- 6 between \$75,000 and \$100,000
- 7 \$100,000 and more
- 96 Does not know

E13 How do you perceive your economic situation compared with other people your age?

- 1 You consider that you are well off
- 2 You consider that your income meets your basic needs
- 3 You consider yourself poor
- 4 You consider yourself very poor
- 95 Does not know

E13a Do you or does somebody in your household own a car? (Long-term lease included).

- 1 Yes
- 2 No

E13b Do you or does somebody in your household own a house or an apartment?

- 1 Yes
- 2 No

E13c Do you or does somebody in your household have an RRSP (or RRIF) or retirement savings plan?

- 1 Yes
- 2 No

E14 How many people are in your household and permanently live in your home, including yourself? (household excludes roommates)

Do you have PRIVATE health insurance that reimburses totally or partially...

E15a Your medication?

₁ Yes

₂ No

E15b Dental care?

₁ Yes

₂ No

E15c Complementary health services (such as certain diagnostic tests, psychological services, chiropractors, etc.)?

₁ Yes

₂ No