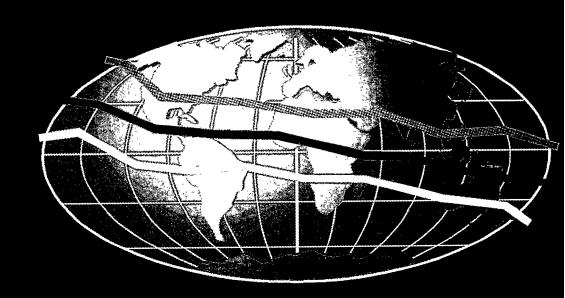


International Health Data Reference Guide, 1995

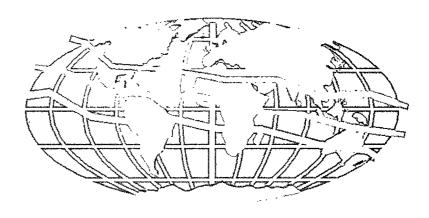
From the CENTERS FOR DISEASE CONTROL AND PREVENTION/National Center for Health Statistics







International Health Data Reference Guide, 1995



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service Centers for Disease Control and Prevention National Center for Health Statistics

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Preface

This seventh edition of the *International Health Data Reference Guide* provides information collected in mid-1995 on the availability of selected national vital, hospital, health manpower resources, and population-based health survey statistics. Information for the 44 nations included in this guide was obtained from the government and official agencies that are listed in the guide for further reference.

The main purpose of the guide is to provide information not readily available in published form. It is not designed to provide information on the availability of measures considered universally documented, such as crude birth and death rates or life expectancy at birth. A secondary purpose is to support the World Health Organization's goal of developing a common basis for international data comparison.

The reader should carefully note the listed qualifications in the footnotes concerning the availability of data in several countries.

The user of this guide is encouraged to contact the listed government and official agencies to obtain specific data.

Acknowledgments

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Publications Branch, Division of Data Services, staff members Demarius V. Miller and Rolfe W. Larson provided publications management and editorial review. Production was managed by Zung Le, Jarmila G. Frazier was the designer, and Patricia L. Wilson managed the printing.

The continued cooperation and contributions provided by the many individuals of the government and official agencies of the countries represented in this publication are gratefully acknowledged.

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Symbol

--- Data not available



Natality data by country, selected variables, and most recent year available: 1995

Country	Birth rates by maternal age	Births by maternal age and birth order	Births by maternal age and marital duration	Births by birth- weight	Births by crown-heel length	Births by length of gestation	Births by marital status
Argentina	1990			1990			1990
Australia	1993	1993	1993	1991		1991	1993
Austria	1994	1994	1994	1994	1994	1994	1994
Belgium				1993			
Bulgaria	1993	1993	1993	1993	1993	1993	# # #
Canada	1993	1993		1993		1993	1993
Chile	1993	1993	1993	1993	1993	1993	1993
China (People's Republic of)	1992	1992	1992	1992		1992	1992
Czech Republic	1993	1993	1993	1993	1993	1993	1993
Denmark	1993	1993	1989	1993	1993	1993	1993
Estonia	1993	1993	1993	1993	1993	1993	1993
Finland	1994	1994	1994	1994	1994	1994	1994
France	1993	1993	1993			1993	1993
Germany	1993	1993	1993	1993	1993		1993
Greece	11991	¹ 1987	¹ 1991	(¹)		(¹)	¹ 1991
Hong Kong	1993	1993	1993	1993			1993
Hungary	1994	1994	1994	1994	1994	1994	1994
Iceland	1994	1994	1994	1994	and on the	1994	1994
Israel	1993	1993	1992	1993		1992	1993
Italy	² 1992	² 1992	² 1992	² 1992		² 1992	
Japan	1993	1993	1993	1993		1993	1993
Korea (Republic of)	1993	1993		1993	and the second s	and the set	
Latvia	1994	1994	1994	³ 1994			1994
Lithuania	1993–94	1993–94		1993–94		1993	1993–94
Luxembourg	1994	1994	1994	1991	1991	1991	1994
Netherlands	1994	1994	1994	1991–93	1991–93		1994
New Zealand	1993	1993	1993	1993		1993	1993
Norway	1994	1994	1994	1994		1994	1994
Poland	1994	1994	1994	1994			1994
Portugal	1994	1994	1994	1994		1994	1994
Russian Federation	1994	1994		and the state of t	• • -		
Singapore		1993		1993		1993	
Slovak Republic	1992	1992	1992	1992	1992	1992	1992
Spain	1992	1992	1992	1992		1992	1992
Sweden	1994	1994	1994	1992	1992	1992	1994

Natality data by country, selected variables, and most recent year available: 1995—Continued

Country	Birth rates by maternal age	Births by maternal age and birth order	Births by maternal age and marital duration	Births by birth- weight	Births by crown-heel length	Births by length of gestation	Births by marital status
Switzerland	1994	⁴ 1994	⁴ 1994	1994	1994		1994
Ukraine	1994	1992		1994		1994	1994
United Kingdom:		en applijanteten en een 2000 in 1860 van 1860 van 1860 van de 1860 van 1860	t no v room alla mellion sidelijoide saditus vila transillatus diposaadessa	Annual Control of the			
England	1994	1994	1994	1994		1993	1994
Wales	1994	1994	1994	1994		1993	1994
Northern Ireland	1993	1993	1993	1991		1991	1993
Scotland	1993	1993	1993	1993	1993	1993	1993
United States	1993	1993		1993		1993	1993
Venezuela	1989	1989	1989	1989			1989
Yugoslavia (Federal Republic of)	1993	1993	1993	1993			1993

¹Data available through 1993 upon request. ²Not published, but available upon request.

³Data from Medical Statistics Bureau.

⁴Legitimate live births only.

Mortality data by country, selected variables, and most recent year available: 1995

Country	Death rates by cause, age, and sex	Deaths by age, sex, and marital status	Life expectancy by age and sex	Legally induced abortions by age of women	Late fetal deaths	Perinatal deaths by cause	Infant deaths by age, cause, and sex	Infant deaths by birth weight
Argentina	1990		1980			1988	1990	***
Australia	1993	1993	1993	100 at 100	1993	1993	1993	
Austria	1994	1994	1994		1994	(¹)	1994	1994
Belgium								
Bulgaria	1993	1993	1993	1993		1993	1993	1993
Canada	1993	1993	1990–92	1993	1993	1993	1993	1979
Chile	1993	1993	1993	1993	1993	1993	1993	1993
China (People's Republic of)	1990	1990	1990				1990	
Czech Republic	1993	1993	1993	1993	1993	A ST THE	1993	1993
Denmark	1993	1993	1992–93	1993	1992	1992	1992	1992
Estonia	1993	1993	1992	1993	1993	1993	1993	
Finland	1994	1994	1994	1994	1994	1993	1994	1993
France	1993	1993	1993	1992	1993		1993	
Germany	1993	1993	² 1990	1993	1993	_(³)	1993	1993
Greece	⁴ 1991	⁴ 1987	⁴ 1980	1990	⁴ 1991	(⁵)	⁴1987	
Hong Kong	1993	1993	1993			1993	1993	
Hungary	1994	1994	1994	1994	1994	1994	1994	1994
Iceland	1993	1993	1993	1993	1994	1993	1993	1994
Israel	1993		1993	1993	1991	1991	1993	1992
Italy	⁶ 1992	⁶ 1992	1991	1993	⁶ 1992	⁶ 1992	⁶ 1992	⁶ 1992
Japan	1993	1993	1993	1993	1993	1993	1993	
Korea (Republic of)	⁷ 1993	1993	1991		pay 100 AN		1993	
Latvia	1994	1994	1994	⁸ 1994	1994	1994	1994	
Lithuania	1993–94		1991–94	1993–94	1993	1993-94	1993–94	1993
Luxembourg	1994	1994	1985–87		⁹ 1992	1994	1994	
Netherlands	1993	1994	1993	1990	1993	1993	1993	
New Zealand	1993	1994	1990–92	1993	1994	1993	1993	1993
Norway	1993	1994	1994	1994	1993	1993	1993	1993
Poland	1994	1994	1993		1994	1994	1994	1994
Portugal	1994	1994	1994		1994	1994	1994	
Russian Federation	1994		1994	1994	1994	1994	1994	1994
Singapore	¹⁰ 1993	1993	1993	1993	1993	1993	1993	
Slovak Republic	1992	1992	1992	1992	1992	1992	1992	1992
Spain	1992	1992	1992		1992	1992	1992	
Sweden	1992	1994	1994	1993	1994	1992	1992	1988

Mortality data by country, selected variables, and most recent year available: 1995—Continued

Country	Death rates by cause, age, and sex	Deaths by age, sex, and marital status	Life expectancy by age and sex	Legally induced abortions by age of women	Late fetal deaths	Perinatal deaths by cause	Infant deaths by age, cause, and sex	Infant deaths by birth weight
Switzerland	1994	1994	1994		1994	1994	1994	1985
Ukraine	1994		1994	1994		1994	1994	
United Kingdom:		ere dette freihete i july flyste i dette er vertildet voller i segte villete july dette freihete verde verde v	te a pertine a replace de la la la comita del Millardo, en estado en el apetido del Millardo. El pri					
England	1993	1993	1993	1994	1994	1994	1994	1994
Wales	1993	1993	1993	1994	1994	1994	1994	1994
Northern Ireland	1993	1993	1991–93		1993	1993	1993	
Scotland	1994	1994	1994	1993	1994	1994	1994	1990
United States	1992	1992	1992	1992	1992		1992	1990
Venezuela	1989	1989	1990		1989	1989	1989	
Yugoslavia (Federal Republic of)	1993	1993	1992–93	1993	1993	1993	1993	

¹Early infant deaths by cause only.

Vital Statistics 5

²Available for the former German Democratic Republic for 1988–89.

³Available for the former German Democratic Republic for 1988.

⁴Not published, but available through 1993 upon request.

⁵Data available through 1993 upon request.

⁶Not published, but available upon request.

⁷Available for number of deaths.

⁸Data from Medical Statistics Bureau.

⁹Fetal deaths.

¹⁰Published by cause only.

Marriage and divorce data by country, selected variables, and most recent year available: 1995

Country	Crude marriage rates	Marriages by age of bride and groom	Crude divorce rates	Country	Crude marriage rates	Marriages by age of bride and groom	Crude divorce rates
Argentina	1989		¹ 1989	Luthuania	1993–94	1993–94	1993-94
Australia	1993	1993	1993	Luxembourg	1994	1994	1994
Austria	1994	1994	1994	Netherlands	1994	1994	1994
Belgium				New Zealand	1994	1994	1994
Bulgaria	1993	1993	1993	Norway	1994	1994	1994
Canada	1993	1993	1992	Poland	1994	1994	1994
Chile	1993	1993	² 1992	Portugal	1994	1994	1994
China (People's Republic of)	1993		1993	Russian Federation	1994		1994
Czech Republic	1993	1993	1993	Singapore	1993	1993	1993
Denmark	1993	1993	1993	Slovak Republic	1992	1992	1992
Estonia	1993	1993	1993	Spain	1992	1992	1993
Finland	1994	1994	1994	Sweden	1994	1994	1994
France	1993	1993	1992	Switzerland	1994	1994	1994
Germany	1993	1993	1993	Ukraine	1994	1994	1994
Greece	³ 1991	³ 1991	³ 1989	United Kingdom:	and the second second second second second		
Hong Kong	1994	1994	1993	England	1993	1993	1993
Hungary	1994	1994	1994	Wales	1993	1993	1993
Iceland	1994	1994	1994	Northern Ireland	1993	1993	1993
Israel	1993	1993	1993	Scotland	1991	1991	1991
Italy	1992	1992	1993	United States	⁴ 1990	⁵ 1990	⁴ 1990
Japan	1993	1993	1993	Venezuela	1990		1990
Korea (Republic of)	1990	1993	1990	Yugoslavia (Federal Republic of)	1993	1993	1993
Latvia	1994	1994	1994				.550

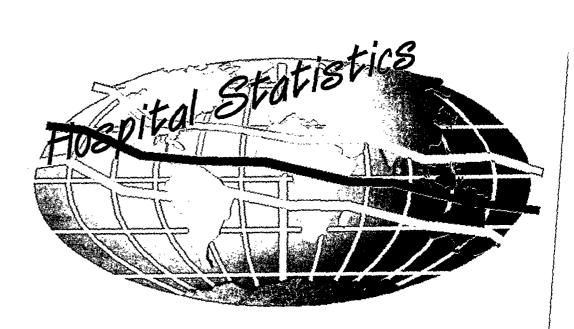
¹Legal separation or divorce.

²Provisional data available for 1992.

³Not published, but available through 1993 upon request.

⁴Provisional data available for 1994.

⁵Includes District of Columbia and 47 of the 50 States.



Facility statistics by country, selected variables, and most recent year data published: 1995

				Data tabulate	d		
Country	Hospital coverage	Beds and inpatient utilitzation	Facilities and services	Outpatient visits	Personnel	Financial data	Most recently published data
Argentina	All hospitals	Yes	No	No	Yes	No	1990
Australia	All hospitals	Yes	Yes	No	Yes	Yes	1991-92
Austria	All hospitals	Yes	Yes	No	Yes	¹ Yes	1993
Belgium	All hospitals	Yes	Yes	No	Yes	Yes	1993
Bulgaria	All hospitals	Yes	No	Yes	Yes	No	1992
Canada	General and other allied special hospitals	Yes	Yes	Yes	Yes	Yes	1 99 1–92
	Mental and psychiatric hospitals	Yes	Yes	Yes	Yes	Yes	1989-90
Chile	No national statistics					.00	1000 00
China (People's Republic of)	All hospitals	No	No	No	Yes	Yes	1994
Czech Republic	All hospitals	Yes	Yes	Yes	Yes	²Yes	1993
Denmark	All hospitals	Yes	Yes	Yes	Yes	Yes	1993
Estonia	All hospitals	Yes	Yes	Yes	Yes	No	1993
Finland	General and psychiatric hospitals	Yes	Yes	Yes	Yes	No	1993
France	Public hospitals	Yes	Yes	Yes	Yes	Yes	1993
	Private hospitals	Yes	Yes	No	Yes	Yes	1993
	Mental hospitals	Yes	Yes	Yes	Yes	Yes	1992
Germany	All hospitals	Yes	Yes	No	Yes	Yes	1993
Greece	All hospitals	Yes	Yes	No	Yes	³ Yes	⁴ 1994
Hong Kong	Public hospitals	Yes	Yes	Yes	Yes	Yes	1993–94
	Private hospitals	Yes	No	No	⁵ Yes	No	1994
Hungary	All hospitals	Yes	⁶ Yes	⁶ Yes	Yes	⁶ Yes	1993
Iceland	All hospitals	Yes	Yes	Yes	Yes	⁷ Yes	1992
Israel	All hospitals	Yes	Yes	8Yes	⁹ Yes	¹⁰ Yes	1994
Italy	All hospitals	Yes	Yes	No	Yes	Yes	1992
Japan	All hospitals	Yes	Yes	Yes	Yes	No	1993
Korea (Republic of)	All hospitals	Yes	Yes	Yes	Yes	No	1994
Latvia	All hospitals	Yes	Yes	Yes	Yes	No	1994
Lithuania	All hospitals	Yes	Yes	Yes	Yes	No	1994
Luxembourg	All hospitals	Yes	Yes	No	¹¹ Yes	Yes	1994
Netherlands	General and specialized hospitals	Yes	Yes	Yes	Yes	Yes	1994
	Psychiatric hospitals	Yes	Yes	Yes	Yes	Yes	1994
New Zealand	Public and psychiatric hospitals	Yes	Yes	Yes	No	Yes	¹² 1991
Norway	All hospitals	Yes	No	Yes	Yes	Yes	1994

Facility statistics by country, selected variables, and most recent year data published: 1995—Continued

				Data tabulate	d		_
Country	Hospital coverage	Beds and inpatient utilitzation	Facilities and services	Outpatient visits	Personnel	Financial data	Most recently published data
Poland	General and mental hospitals	Yes	No	No	Yes	No	1994
Portugal	Public hospitals	Yes	Yes	Yes	Yes	Yes	1993
	Private hospitals	Yes	Yes	Yes	Yes	No	1991
Russian Federation	All hospitals	Yes	Yes	Yes	Yes	Yes	1994
Singapore	Public hospitals	Yes	Yes	Yes	Yes	Yes	1994
	Private hospitals	Yes	Yes	No	No	No	1994
Slovak Republic	All hospitals	Yes	Yes	Yes	Yes	Yes	1992
Spain	All hospitals	Yes	Yes	Yes	Yes	Yes	1992
Sweden	All hospitals	Yes	Yes	Yes	¹³ Yes	¹³ Yes	1993
Switzerland	90-percent participation	Yes	Yes	No	Yes	14Yes	1993
Ukraine	All hospitals	Yes	Yes	Yes	Yes	Yes	1994
United Kingdom:							1
England	National Health Service hospitals	Yes	Yes	Yes	Yes	Yes	1993–94
Wales	National Health Service hospitals	Yes	Yes	Yes	Yes	Yes	1993-94
	Private hospitals	Yes	No	No	¹⁵ Yes	No	1994
Northern Ireland	National Health Service hospitals	Yes	Yes	Yes	Yes	¹⁶ Yes	1992-93
Scotland	Scottish Health Service hospitals	Yes	Yes	Yes	Yes	Yes	1993
United States	Hospitals with 6 beds or more	Yes	Yes	Yes	Yes	Yes	1994
Venezuela	80 percent of public hospitals	Yes	Yes	Yes	Yes	Yes	(17)
Yugoslavia (Federal Republic of)	All hospitals	Yes	Yes	Yes	Yes	No	1994

¹Data available for 50 percent of government hospitals.

²Not published, but data available on hospitals administered by Ministry of Health.

³No national statistics available for individual hospitals.

⁴Not published, but available through 1995 upon request.

⁵Most recently published data—1992.

⁶Data available from the Social Insurance Institute.

⁷Most recently published data—1994.

⁸Data available on government hospitals.

⁹Data available on government and general fund hospitals.

¹⁰On national level, estimates only.

¹¹Not published.

¹²Not published, but available through 1994 upon request.

¹³Data not available per individual hospital.

¹⁴Subsample only.

¹⁵Nursing staff only.

¹⁶Published up to 1991–92. Later years available upon request.

¹⁷Not published, but available through 1990 upon request.

Discharge statistics by country, selected variables, and most recent year data published: 1995

			Data	tabulated		Most recently
Country	Hospital coverage	Age and sex	Length of stay	Diagnosis	Surgical procedures	published data
Argentina	All hospitals	Yes	No	Yes	No	1990
Australia	Public hospitals (acute)	Yes	Yes	Yes	Yes	1991-92
	Private hospitals	Yes	Yes	Yes	Yes	1991 9 2
Austria	All hospitals	Yes	Yes	Yes	No	1992
Belgium	All hospitals	Yes	Yes	No	No	1993
Bulgaria	All hospitals	Yes	Yes	Yes	Yes	1992
Canada	General and specialized hospitals, including psychiatric units	Yes	Yes	Yes	Yes	1992– 9 3
A - L AND USE CO.	Mental and psychiatric hospitals	Yes	Yes	Yes	No	1992-93
Chile	No national statistics					
China (People's Republic of)	No national statistics					_
Czech Republic	All hospitals	Yes	Yes	Yes	Yes	1993
Denmark	All hospitals	Yes	Yes	Yes	Yes	1993
Estonia	All hospitals	Yes	Yes	Yes	Yes	1993
Finland	All hospitals	Yes	Yes	Yes	Yes	1993
France	Public hospitals (sample survey)	Yes	Yes	Yes	No	1987
	Private hospitals starting 1987	Yes	Yes	Yes	No	1987
	Mental hospitals	No	Yes	No	No	1989
Germany	All hospitals	Yes	Yes	Yes	No	1993
Greece	All hospitals	Yes	Yes	Yes	Yes	1992
Hong Kong	Public hospitals	No	Yes	Yes	No	199394
	Private hospitals	No	Yes	Yes	No	1994
Hungary	All hospitals	¹Yes	Yes	¹ Yes	No	1993
Iceland	All hospitals	Yes	Yes	Yes	Yes	1992
Israel	Short-stay hospitals	Yes	Yes	Yes	Yes	1990
Italy	All hospitals (sample of discharges during the first 7 days of each month)	Yes	Yes	Yes	Yes	1992
Japan	Hospitals and general clinics (sample survey)	Yes	Yes	Yes	No	1993
Korea (Republic of)	All hospitals	No	Yes	Yes	Yes	1994
Latvia	All hospitals	² No	Yes	Yes	Yes	1994
Lithuania	All hospitals	² Yes	Yes	Yes	Yes	1994
Luxembourg	All hospitals	No	Yes	³ Yes	No	1994
Netherlands	General and most specialized hospitals, excluding psychiatric hospitals	Yes	Yes	Yes	Yes	1992

Discharge statistics by country, selected variables, and most recent year data published: 1995—Continued

			Data	tabulated		Most recently
Country	Hospital coverage	Age and sex	Length of stay	Diagnosis	Surgical procedures	published data
Netherlands—Continued	(98.8 percent of discharges)					
	Psychiatric hospitals	Yes	Yes	Yes	No	1993
New Zealand	Public, private, and psychiatric hospitals (inpatients only)	Yes	Yes	Yes	Yes	1993
Norway	General and specialized somatic hospitals	Yes	Yes	Yes	Yes	1993
Poland	General (10 percent sample) and mental hospitals	Yes	Yes	Yes	No	1994
Portugal	Public hospitals	Yes	Yes	⁴Yes	Yes	1993
_	Private hospitals	Yes	Yes	No	Yes	1989
Russian Federation	All hospitals	No	Yes	Yes	Yes	1994
Singapore	All hospitals	Yes	Yes	Yes	Yes	1994
Slovak Republic	All hospitals	Yes	Yes	Yes	Yes	1992
Spain	All hospitals	Yes	Yes	Yes	No	1992
Sweden	General and specialized hospitals (all discharges)	Yes	Yes	Yes	Yes	⁵ 1992
Switzerland	Short-stay and psychiatric hospitals (40 percent of discharges)	Yes	Yes	Yes	Yes	1994
Ukraine	All hospitals	No	Yes	Yes	Yes	1994
United Kingdom:	•					
England	National Health Service hospitals	Yes	Yes	Yes	Yes	1993–94
Wales	National Health Service hospitals	Yes	Yes	Yes	Yes	1992–93
Northern Ireland	National Health Service hospitals	Yes	Yes	Yes	Yes	1992–93
Scotland	Scottish Health Service hospitals (excluding maternity patients and those from psychiatric hospitals and units ⁶)	Yes	Yes	Yes	Yes	1993
United States	Short-stay general and specialized hospitals (sample of discharges), excluding Federal ⁷ and institutional hospitals, and hospitals with less than 6 beds	Yes	Yes	Yes	Yes	1993
Venezuela	Public hospitals (80 percent)	Yes	Yes	Yes	No	⁸ 1983
Yugoslavia (Federal Republic of)	All hospitals	Yes	Yes	Yes	No	1993

¹Data available from Social Insurance Institute.

²Selected age groups.

³Limited to broad categories.

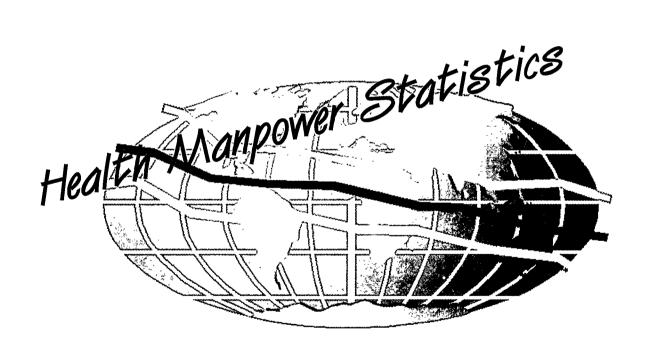
⁴Only general hospitals are included. Not published, but available through 1991.

⁵Not published, but available for 1993 upon request.

⁶Psychiatric units from general hospitals are excluded.

⁷Separate statistics are available for these categories of discharges.

⁸Not published, but available through 1990 upon request.



Health manpower statistics by country, type of profession, and most recent year data published: 1995

			Data ta	bulated	<u> </u>		Most recently
Country	- Physicians	Dentists	Professional nurses	Assistant nurses	Pharmacists	Midwives	published data
Argentina	Yes	Yes	Yes	Yes	Yes	No	1980
Australia	Yes	Yes	Yes	Yes	Yes	No	1993
Austria	Yes	Yes	¹Yes	Yes	Yes	Yes	1993
Belgium	Yes	Yes	Yes	Yes	Yes	Yes	1994
Bulgaria	Yes	Yes	Yes	No	Yes	Yes	1992
Canada	Yes	Yes	Yes	Yes	Yes	No	1992
Chile	Yes	Yes	Yes	No	Yes	No	1992
China (People's Republic of)	No	No	Yes	No	Yes	No	1994
Czech Republic	Yes	Yes	Yes	Yes	Yes	Yes	1993
Denmark	Yes	Yes	Yes	Yes	Yes	Yes	1993
Estonia	Yes	Yes	Yes		Yes	Yes	1993
Finland	Yes	Yes	Yes	Yes	Yes	Yes	1993
France	² Yes	Yes	Yes	Yes	Yes	Yes	1993
Germany	Yes	Yes	³ Yes	³Yes	Yes	³Yes	1993
Greece	Yes	Yes	³ Yes	³Yes	³Yes	³Yes	⁴ 1994
Hong Kong	Yes	Yes	Yes	No	Yes	Yes	1994
Hungary	Yes	Yes	Yes	Yes	Yes	Yes	1993
Iceland	Yes	Yes	Yes	Yes	Yes	Yes	1992
Israel	Yes	Yes	Yes	Yes	Yes	Yes	1983
Italy	³ Yes		³ Yes	³Yes			
Japan	⁵ Yes	⁵ Yes	Yes	Yes	⁵ Yes	Yes	⁶ 1994
Korea (Republic of)	Yes	Yes	Yes	Yes	Yes	Yes	1994
Latvia	Yes	Yes	Yes	No	Yes	Yes	1994
Lithuania	Yes	Yes	Yes	No	Yes	Yes	1994
Luxembourg	Yes	Yes	⁷ Yes	⁷ Yes	Yes	Yes	1994
Netherlands	⁸ Yes	⁸ Yes	No	No	⁹ Yes	Yes	1994
New Zealand	Yes	Yes	Yes	Yes	Yes	Yes	1990
Norway	Yes	Yes	Yes	Yes	No	Yes	¹⁰ 1995
Poland	Yes	Yes	Yes	Yes	Yes	Yes	1994
Portugal	Yes	Yes	Yes	Yes	Yes	Yes	1993
Russian Federation	Yes	Yes	Yes	Yes	Yes	Yes	1994
Singapore	Yes	Yes	Yes	Yes	Yes	Yes	1994
On gapore	l res	162	168	168	162	162	1994

Health manpower statistics by country, type of profession, and most recent year data published: 1995—Continued

			Data ta	bulated			Most
Country	Physicians	Dentists	Professional nurses	Assistant nurses	Pharmacists	Midwives	recently published data
Slovak Republic	Yes	Yes	Yes	Yes	Yes	Yes	1992
Spain	Yes	Yes	Yes	No	Yes	Yes	1994
Sweden	Yes	Yes	Yes	Yes	² Yes	Yes	1993
Switzerland	Yes	Yes	¹¹ Yes	¹¹ Yes	Yes	¹¹ Yes	1993
Ukraine	Yes	Yes	Yes	Yes	Yes	Yes	1994
United Kingdom:							
England	Yes	Yes	Yes	Yes	Yes	Yes	1993
Wales	Yes	Yes	Yes	Yes	Yes	Yes	1994
Northern Ireland	Yes	Yes	Yes	Yes	Yes	Yes	1993–94
Scotland	Yes	Yes	Yes	Yes	Yes	Yes	1993
United States	Yes	Yes	Yes	Yes	Yes	Yes	1993
Venezuela	Yes	Yes	Yes	Yes	Yes	Yes	⁵ 1989
Yugoslavia (Federal Republic of)	Yes	Yes	Yes	Yes	Yes	Yes	1994

¹Data include all nurses.

²Data available for 1994 upon request.

³Only in hospitals.

⁴Not published, but available through 1995 upon request.

⁵Most recent data available for 1992.

⁶Only employed personnel.

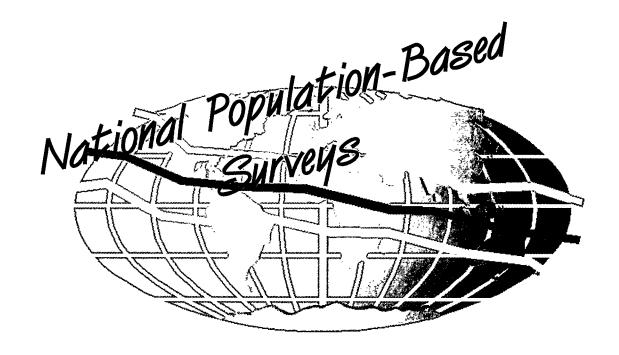
⁷Not published.

⁸Data include unemployed physicians, dentists, latest data available for 1991.

⁹Data available include only pharmacists working in pharmacies and hospitals; exclude those working in laboratories, industry, and universities.

¹⁰Includes both economically active and not economically active personnel.

¹¹Most recently tabulated data for nurses and midwives available for 1990.



Country	Title	Frequency	Sample size ¹	Type of survey
Australia	Australian Health Survey	1977–78, 1983	15,000 dwellings(1977–78); 18,000 dwellings (1983)	Health interview
	National Health Survey	1989–90, 1995	22,000 dwellings (55,000 persons)	Health interview
	Survey of Disability, Ageing, and Carers	1988, 1993 (Previously conducted in 1981 as the Survey of Handicapped Persons)	16,000 dwellings (42,000 persons); 600 institutions (5,000 persons)	Disability
	Time Use Survey	1992	3,000 dwellings (7,000 persons, 14,000 person-days)	Multipurpose with lifestyle information
	National Aboriginal and Torres Strait Islander Survey	1994	5,000 dwellings (17,500 persons)	Multipurpose with health core
	National Nutrition Survey	1995	14,000 persons	Nutrition
Austria	Special Sport, Home, and Leisure Accident Survey	1970, 1980, 1989	29,000 households (67,000 persons)	Multipurpose with health core
	Special Smoking Habits Survey,	1972, 1979, 1986	29,000 households (67,000 persons)	Health habits
	Special Health Survey	1973, 1983, 1991	29,000 households (67,000 persons)	Multipurpose with health core
	Special Impairment, Disability, and Handicap Survey	1976, 1986	29,000 households (67,000 persons)	Disability
Canada	Canada Health Survey	1978–79	Interview component, 12,218 dwellings with 40,000 persons 15 years of age and older	Health interview
			Clinical examination component, 3,450 dwellings with 8,486 persons 2 years of age and older	
	Canada Fitness Survey (followup—Campbell Survey on Well-being in Canada 1988)	1981, proposed repeat survey in 1991 and longitudinal followups of 1981 sample in the interim	13,500 households with 31,000 persons 7 years of age and older	Fitness
	General Social Survey	1985, 1991 continuous cycles of 6 years in core areas	10,000 households with 13,000 persons 15 years of age and older	Multipurpose with health core
	Canadian Health and Disability Survey	Supplement to monthly Labour Force Survey, October 1983, June 1984	65,800 households (15,854 persons)	Disability

¹Sample size shown is for the latest survey conducted unless otherwise stated.

Country	Title	Frequency	Sample size ¹	Type of survey
Canada (Continued)	Health Promotion Survey	1985, 1990	11,000 persons 15 years of age and older	Health interview
	Health and Activity Limitation Survey	Postcensal survey—1986 (households); 1987 (institutions); 1991	184,500 persons in households, 19,100 persons in 1,100 institutions	Health interview
	Aboriginal Peoples Survey	1991	20,000 persons	Health interview
	National Population Health Survey	1994	22,000 households (11,000 persons)	Health interview
China, (People's Republic of)	National Sample Survey on the Situation of Children	1987, 1992	40,000 households	Multipurpose
Czech Republic	Survey of Treated Morbidity	1986	131,097 persons of all ages	Health interview
	Reproductive Health Survey	1993	4,500 women 15-44 years of age	Family planning
	Health Interview Survey, Czech Republic, 1993 (HIS CR 93)	1993	1,600 persons 15 years of age and older	Health interview
Denmark	The Danish Health and Morbidity Survey	1986–87, 1994	6,000 persons	Health interview and health behavior
	Population Survey on Prevention of Musculoskeletal Disorders	1990–92	6,000 persons 16 years of age and older	Health promotion and behavior
Estonia	Living Conditions Survey	1994	5,000 persons 18-74 years of age	Level of living
	National Health Interview Survey	1996	5,000 persons 16 years of age and older	Health interview
Finland	Population Health Survey	1964, 1968, 1976, 1987	7,000 families (18,000 persons)	Health and security
	Mini-Finland Health Survey	1977–81	8,000 persons 30 years of age and older	Multipurpose
France	French Health Survey	1960, 1970, 1980, 1991–92	21,000 persons	Health interview
	National Inpatients Survey	1981, 1991–92	5,000 persons	Health interview
	Health Survey Social Protection	Annually, since 1988	7,800 persons	Health interview

¹Sample size shown is for the latest survey conducted unless otherwise stated.

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Country	Title	Frequency	Sample size ¹	Type of survey
Germany	Questions on Health— Microcensus Supplementary Survey	Irregular intervals from 1963 to 1986; every 3 years since 1986	Sampling fraction of households (0.5 percent)	Multipurpose with health core
Hungary	Health Interview Survey	1986, 1993	16,000 households (37,500 persons)	Health interview
	Health Behavior Survey	1994	5,476 persons 15-64 years of age	Health interview
iceland	Survey of Living Conditions in Iceland, 1988	1988	2,000 persons 16-75 years of age	Level of living
Israel	Uses of Health Services Survey	1977, 1981, 1993	6,000 households (22,000 persons)	Health service usage and health interview
	Survey of the Elderly (Persons Aged 60 and Over in Households)	1982, 1985	3,300 households with persons 60 years of age and older	Level of living
Italy	The Survey of Health Conditions of the Population and the Use of Health Services	1980–83, 1986–87, 1990–91, 1994	20,000 households (60,000 persons)	Multipurpose
Japan	Comprehensive Survey of Living Conditions of People on Health and Welfare	Every third year, starting in 1986	250,000 households (780,000 persons)	Level of living
Korea (Republic of)	Patients Survey	Biennial, since 1969	6,251 hospitals, clinics, and health centers	Health interview
	National Nutrition Survey	Annual, since 1969	2,000 households (7,215 persons)	Health and nutrition interview
	Social Statistics Survey	Annual, since 1977	34,000 households	Multipurpose
	National Health Interview Survey	Triennial, since 1983	6,605 households	Health service usage and health interview

¹Sample size shown is for the latest survey conducted unless otherwise stated.

Country	Title	Frequency	Sample size ¹	Type of survey
Latvia	Epidemiologic Research on Most Common Noninfectious Diseases	1991	18,040 persons selected (data on 5,449 persons)	Multipurpose
	Living Conditions Survey	1994	3,500 persons	Living conditions
Netherlands	Quality of Life Survey	1974–86 every third year; continuous from 1989	3,500 persons 18 years of age and over	Multipurpose
	National Health Interview Survey	Continuous, beginning 1981	3,000 households (9,000 persons)	Health interview
	National Health Interview Survey of Turkish Inhabitants in the Netherlands	1989–90	5,306 persons	Health Interview
New Zealand	Household Health Survey	1992-93; planned every 3-5 years	6,825 persons	Health interview
Norway	Health Survey	1968, 1975, 1985, 1995	5,100 households (13,100 persons)	Health interview
	Survey of Level of Living	1973, 1980, 1983, 1987, 1991, 1995	5,100 persons 16 years of age and over	Level of living
	Working Environment Survey	1989, 1993	4,359 employees in 1,050 establishments	Working conditions and health
Poland	Social Status of Household Survey	1985, 1986, 1989, 1990	120,000 households (380,000 persons)	Level of living with health component
	Family Health Survey	1987	21,351 households (68,000 persons)	Health interview
	Sociodemographic and Health Determinants of Infant Mortality Survey	1991	6,400 children under 1 year of age	Infant mortality
	Household Health and Expenditures for Health Care Survey	1994	3,800 households (12,500 persons)	Health expenditures
	Disabled on the Labour Market Survey	1995	8,000 persons	Disability

¹Sample size shown is for the latest survey conducted unless otherwise stated.

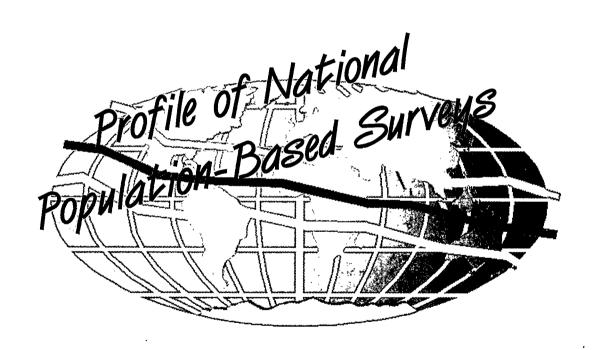
Country	Title	Frequency	Sample size ¹	Type of survey
Portugal	National Health Survey	Entire country in 1987, 1995–96	20,000 households	Health interview
-		Lisbon area, 1989	4,892 households	
		North area, 1990	5,055 households	
		Alentejo area, 1991	2,373 households	
		Algarve area, 1993	1,260 households	
Singapore	National Health Survey	Beginning in 1992, every 5-7 years	3,568 persons 18-69 years of age	Health interview and examination
	Morbidity Survey of Outpatient	1993	23,000 patients	Medical consultation
	Behavioural Risk Factor Survey	1994, every 2 years	2,530 Singapore residents 18–64 years of age	Health interview
	Survey on Cigarette Smoking Among Singaporeans	1995	5,000 persons 18-64 years of age	Smoking habits
	National Survey of Senior Citizens	1995, every 10 years	6,000 persons 55 years of age and older	Health interview
Spain	Survey on Impairments, Disabilities, and Handicaps	1986	75,000 households (275,000 persons)	Disability
	National Health Survey	1987	40,000 persons	Health interview
Sweden	Survey of Living Conditions	Annual, since 1975	7,000 persons 16-84 years of age	Level of living
Switzerland	Trend Survey on Health Behavior and Alcohol Consumption in Switzerland	1975, 1981, 1987	Between 1,500 and 3,000 persons 15 years of age and older	Health behavior
	Swiss Health Survey (SOMIPOPS)	1981–82	5,860 persons 20 years of age and older	Health interview
	Health Behavior of School-Age Children in Switzerland	1986, 1990, 1994	16,000 children between 11 and 16 years of age	Health behavior
	Swiss Health Promotion Survey	1989	2,111 persons 20-74 years of age	Health interview
	Swiss Health Survey	1992–93	16,000 households with persons 15 years of age and over	Health interview

¹Sample size shown is for the latest survey conducted unless otherwise stated.

Country	Title	Frequency	Sample size ¹	Type of survey
Ukraine	National Health Survey	Annual, since 1986	850,000 persons	Health examination
United Kingdom	General Household Survey	Continuous, since 1971 (Survey of Sickness conducted 1944–52)	10,000 households (20,000 persons)	Multipurpose
United States	National Health Interview Survey (NHIS)	Continuous, since 1957	50,000 households (135,000 persons)	Health interview
	National Health and Nutrition Examination Survey(NHANES)	I - 1971–74 IA - 1974–75 II - 1976–80 III - 1988–94	32,000 persons 7,000 persons 28,000 persons 30,000 persons	Health interview and examination
	Hispanic Health and Nutrition Examination Survey (HHANES)	1982–84	16,000 persons aged 6 months to 74 years	Health interview and examination
	National Survey of Family Growth (NSFG)	1973, 1976, 1982, 1988, 1995	10,500 women 15–44 years of age	Family planning
	National Health and Nutrition Examination Survey I— Epidemiologic Follow-up Study (NHEFS)	1982–84, 1986, 1987, 1992	Periodic followup to 14,407 adults in NHANES I	Health interview
	Longitudinal Study of Aging (LSOA)	1984, 1986, 1988, 1990	7,527 persons 70 years of age and older in the 1984 NHIS	Health interview

¹Sample size shown is for the latest survey conducted unless otherwise stated.

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Title	Australian Health Survey
Responsible agency or ministry	Australian Bureau of Statistics
Objective	To provide information about the health of Australians and their use and need of various health services and facilities.
Scope	Sample of 18,000 private and nonprivate dwellings selected throughout Australia covering about one-third of 1 percent of the population. All persons 15 years of age and older were interviewed (mother was usual respondent for children less than 15 years of age).
Collection method	Interviewer-administered questionnaire.
Data content	Health-related actions, acute illness conditions, hospitalizations, reduced activity, consultations with health professionals, medications taken, and demographic and socioeconomic characteristics.
Frequency	Conducted in 1977–78 and 1983 (replaced by National Health Survey Series).
Availability of data	Sample data file and statistical reports of survey findings (charges apply).
Contact	Information Services or Health Section Australian Bureau of Statistics P.O. Box 10 Belconnen, Australia 2616 Phone: (61) (6) 252 5249 FAX: (61) (6) 253 1404

Title National Aboriginal and Torres Strait Islander Survey Responsible Australian Bureau of Statistics agency or ministry **Objective** To provide comparable information across Australia about Aboriginal and Torres Strait Islander people. Scope A sample of approximately 5,000 dwellings or 17,500 Aboriginal and Torres Strait Islander people, Households were selected at random using a multistage sample design stratified by the 35 Aboriginal and Torres Strait Islander Commission regions and the Torres Strait Area. Collection method Interviewer-administered questionnaire. Family and culture, housing, education and training, employment and income, law and justice, health data including health **Data content** actions, attitudes to health, health status, illness conditions, health-risk factors, disability, and access and attitudes to health services and facilities. Irregular. First conducted in 1994. Frequency Standard publications and consultancy service (charges apply). Availability of data Contact National Centre for Aboriginal and Torres Strait Islander Statistics Australian Bureau of Statistics **GPO Box 3796** Darwin NT Australia 0801 Phone: (61) (89) 432 190 (61) (89) 410 715 FAX:

Title

Survey of Disability, Ageing, and Carers

Responsible agency or ministry

Australian Bureau of Statistics

Objective

To provide national data on persons with one or more long-term health conditions and on older persons living in households and health establishments.

Scope

Multistage sample of 42,000 persons in 16,000 residential dwellings and 5,000 patients or residents from approximately 600 randomly selected establishments. All persons in selected dwellings aged 18 years and over are interviewed.

Collection method

Household component—interviewer administered questionnaire. Persons identified as having one or more long-term health conditions, aged 60 years or older, or the principal carers of these two populations are interviewed. Any responsible adult in the household may provide data for persons without a health condition, for persons not at home, and for children under 17 years of age with a condition. Health establishment component—questionnaire completed by administrator of establishment. Carer component—self-enumeration form completed by persons identified as principal carers by recipient of care or who self-identify as providing a comparable level of care to a recipient in another household.

Data content

Household component—chronic conditions, difficulties and help required for personal care, communications and mobility, amount of help required for specific tasks, types of aids to perform everyday tasks, carers, and demographic and socioeconomic characteristics. Health establishment component—same as above in less detail, excluding socioeconomic data.

Frequency

Previously irregular. Similar surveys conducted in 1981 and 1988. Beginning in 1993, conducted at 5-year intervals. Next survey proposed for 1998.

Availability of data

Statistical reports of survey findings, public-use files, special-purpose tabulations, and statistical analysis will be available (charges apply).

Contact

Australian Bureau of Statistics P.O. Box 10

Belconnen, Australia 2616 Phone: (61) (6) 252 7430 FAX: (61) (6) 253 1673

Title **National Health Survey** Responsible Australian Bureau of Statistics agency or ministry To provide baseline and trend data on a broad range of health status indicators and health-related behaviors of Objective Australians. Scope Sample of approximately 22,000 private and nonprivate dwellings selected throughout Australia covering about 55,000 persons. All persons aged 18 years and over in selected households were interviewed. Children aged 15 to 17 years were interviewed with the consent of the parents or guardians. Parents or guardians were asked to provide data for children under 15 years of age. Collection method Interviewer-administered questionnaire and self-administered questionnaires for some topics. Recent illness, chronic illness, general health and well-being, specific women's health issues, hospital episodes, medical Data content consultations, use of medications, short-term disability, smoking, alcohol consumption, self-reported height and weight, accidents, exercise, breastfeeding, sun protection, and demographic and labor force characteristics. Frequency Conducted in 1989-90 and 1995. Planned every 5 years. Availability of Public-use data tapes and statistical reports on survey findings (charges apply). data Information Services or Health Section Contact Australian Bureau of Health P.O. Box 10 Belconnen, Australia 2616

Phone: (61) (6) 252 5249 FAX: (61) (6) 253 1404

National Nutrition Survey Title Responsible Australian Bureau of Statistics agency or ministry To provide baseline data on food and nutrient intakes of Australians and their physical measurements. Objective Sample of approximately 14,000 persons 2 years of age and older, selected from respondents to the National Health Scope Survey. Two or three persons per household will be selected. Qualified nutritionists have been employed as interviewers. Interviewer-administered individual Food Intake Questionnaire Collection method for all persons 2 years of age and older. Signed consent is requested for physical measurements including height, weight, waist and hip circumfernce. Blood pressure readings are taken of persons 16 years of age and older. Consent is given by parent or guardians for children under 18 years of age living at home. Mail-back Food Frequency Questionnaire is provided for selected persons 12 years of age and older. Detailed food intake during previous 24 hours, physical measurements (blood pressure, height, weight, waist, and hip), Data content dietary habits and attitudes, and average frequency of intake of foods over previous 12 months. Frequency Conducted in 1995, no proposal for next survey. Demographic and health data will be available in public-use tapes and statistical reports of survey findings (charges apply). Availability of data Information Services or Health Section Contact Australian Bureau of Statistics P.O. Box 10 Belconnen, Australia 2616 Phone: (61) (6) 252 5249 (61) (6) 253 1404 FAX:

	Australia
Title	Time Use Survey
Responsible agency or ministry	Australian Bureau of Statistics
Objective	To provide national data on the patterns of time use of persons 15 years of age and over, living in households.
Scope	Multistage sample of 7,000 persons in 3,000 residential dwellings, providing 14,000 person-day records. All persons aged 15 years and over in households are interviewed.
Collection method	Household component: Responsible adult answers interviewer-administered questionnaire. Personal questionnaire: Responsible adult answers interviewer-administered questionnaire for all persons in scope. Personal diary: Left to be completed by each person in scope, then collected by interviewer.
Data content	Identification of persons with disability and with severe handicap, identification of principal carers for the latter, type of activity, start and finish time of activity episode, location of activity episode, mode of travel, social context of activity episode, simultaneous activities, and demographic and socioeconomic characteristics.
Frequency	Pilot survey conducted in 1987. Full survey conducted in 1992, planned for 5-year intervals. Next survey scheduled for 1997.
Availability of data	Statistical reports of survey findings, public-use files, and special tabulations are available (charges apply).
Contact	Australian Bureau of Statistics P.O. Box 10 Belconnen, Australia 2616 Phone: (61) (6) 252 6316 FAX: (61) (6) 253 1673

Austria

Special Sport, Home, and Leisure Accident Survey Title Responsible Austrian Central Statistical Office agency or ministry To provide national data on the sport, home, and leisure accidents of the civilian noninstitutionalized population of Austria. **Objective** Sample of about 29,000 households covering about 67,000 persons per microcensus program. Generally, all persons in Scope selected dwellings are interviewed. Adult family member may provide data for persons not at home and for children. Collection method Interviewer-administered questionnaire. Incidence of accidents by cause and place, kind and severity of injuries, primary medical providings and health **Data content** consequences, and demographic and socioeconomic characteristics. Planned every 10 years. Conducted in 1970, 1980, and 1989. Frequency Availability of Statistical reports. data Contact Mag. Jeannette Langgassner Austrian Central Statistical Office

Austrian Central Statistical Office Division of Population Statistics Subdivision Health Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262

FAX: (43) (1) 711 28 726 FAX: (43) (1) 718 24 01

Austria

Title Special Impairment, Disability, and Handicap Survey Responsible Austrian Central Statistical Office agency or ministry To provide national data on the impairment, disability, and handicap status of the civilian noninstitutionalized population of **Objective** Austria. Sample of about 29,000 households covering about 67,000 persons per microcensus program. Generally, all persons in Scope selected dwellings are interviewed. Adult family member may provide data for persons not at home and for children. Interviewer-administered questionnaire. Collection method Prevalence of impairments, disabilities, and handicaps; cause, severity, and duration of disabilities; care, remedies, and **Data content** rehabilitation facilities for disabled people; and demographic and socioeconomic characteristics. Planned every 10 years. Conducted in 1976 and 1986. Frequency Availability of Statistical reports. data Contact Mag. Jeannette Langgassner Austrian Central Statistical Office Division of Populations Statistics Subdivision Health Statistics

> Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262 FAX: (43) (1) 718 24 01

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Austria

Special Health Survey Title Responsible Austrian Central Statistical Office agency or ministry Objective To provide national data on the health status of the civilian noninstitutionalized population of Austria. Sample of about 29,000 households covering about 67,000 persons per microcensus program. Generally, all persons living Scope in the selected dwellings are interviewed. Adult family member may provide data for persons not at home and for children. Collection method Interviewer-administered questionnaire. Incidence of acute illness and prevalence of selected chronic diseases and complaints, medications used, physician visits **Data content** and hospital episodes, participation in health prevention and vaccination programs, health behavior, and demographic and socioeconomic characteristics. Frequency Planned every 10 years. Conducted in 1973, 1983, and 1991. Availability of Statistical reports. data Contact Mag. Jeannette Langgassner Austrian Central Statistical Office **Division of Population Statistics** Subdivision Health Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262 FAX: (43) (1) 718 24 01

Austria

Title

Special Smoking Habits Survey

Responsible agency or ministry

Austrian Central Statistical Office

Objective

To provide national data on smoking habits of the civilian noninstitutionalized population of Austria.

Scope

Sample of about 29,000 households covering about 67,000 persons per microcensus program. All persons aged 16 years or older in selected dwellings are interviewed. Adult family member may provide data for persons not at home.

Collection method

Interviewer-administered questionnaire.

Data content

Prevalence of smokers, ex-smokers, and true nonsmokers; type and amount of tobacco consumption; health consequences and withdrawal of smoking; and demographic and socioeconomic characteristics.

Frequency

Planned every 7 years. Conducted in 1972, 1979, and 1986.

Availability of data

Statistical reports.

Contact

Mag. Jeannette Langgassner Austrian Central Statistical Office Division of Population Statistics Subdivision Health Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria

Phone: (43) (1) 711 28 7262 FAX: (43) (1) 718 24 01

Title **Aboriginal Peoples Survey** Responsible Statistics Canada agency or ministry **Objective** To provide a comprehensive data source about Canada's Aboriginal Peoples, enable an assessment of their socioeconomic conditions, and provide information required to develop programs and services for Aboriginal Peoples in Canada. Scope Noninstitutionalized population (all ages) of Canada who indicated in the 1991 census that they have Aboriginal origins or that they are a registered Indian under the Indian Act of Canada and further indicated that they identify with an Aboriginal group (i.e., North American Indian, Metis, Inuit, or other Aboriginal group such as "Cree" or "Inuvialuit"), and are registered under the Indian Act of Canada. Excluded are 78 Indian reserves and settlements incompletely enumerated in the 1991 census (approximately 38,000 persons) and an additional 181 reserves and settlements incompletely enumerated during the Aboriginal Peoples Survey (approximately 20,000 persons). Collection method Interviewer-administered adult questionnaire and children questionnaire. **Data content** Identity, ancestry, registered Indian status, language and tradition, disability, health, lifestyles and social issues, mobility, schooling, work and related activities, income and expenditures, housing, and sociodemographic characteristics from the census. Frequency Conducted in 1991. Availability of Microdata file, statistical reports, and custom tabulations. data

Contact

Statistics Canada, Post-Censual Surveys Program 9-C8 Jean Talon Building Tunnev's Pasture Ottawa, Ontario K1A 0T6, Canada Phone: (613) 951-4414 FAX:

(613) 951-2906

Canada Fitness Survey Title Responsible Canadian Fitness and Lifestyle Research Institute agency or ministry **Objective** To provide data on physical activity patterns and lifestyle habits of Canadians, as well as the values, motives, and obstacles affecting physical activity. Sample of approximately 13,500 households with 31,000 persons 7 to 69 years of age. Scope Collection method Self-administered questionnaire and clinical examination of physical measurements. Data content Standardized Test of Fitness used to test cardiovascular fitness, flexibility, muscular endurance and strength. Anthropometric measures on standing stretch stature, weight, triceps, biceps, subscapular, suprailiac and calf skinfolds, chest, abdomen, hip, thigh, calf and upper arm girth, diameters of the knee and elbow, and demographic and socioeconomic characteristics. Frequency Conducted in 1981. Availability of Data tapes and statistical reports. data Canadian Fitness and Lifestyle Research Institute Contact 1600 James Naismith Drive, Suite 313

Gloucester, Ontario, Canada K1B 5N4

Phone: (613) 748-5791 FAX: (613) 748-5792

Title Canada Health Survey Responsible Statistics Canada agency or ministry **Objective** To gather data on the prevalence and nature of acute and chronic, mental, and physical illnesses, to permit an assessment of the health status and needs of Canadians, and to measure changes in status and needs. Noninstitutionalized population of persons 15 years of age and older, excluding residents of the Northwest Territories, Scope Indian reserves, and remote areas as defined by the Canadian Labour Force Survey. Exclusions account for about 3 percent of the entire population. Approximately 12,000 households (40,000 persons) interviewed. Medical examinations were administered to a subsample of one-third of these households. Collection method Interviewer-administered questionnaire, self-administered questionnaire, and physical measurement. **Data content** Activity limitations, short-term conditions, accidents and injuries, chronic conditions, impairments, hearing, vision and dental status, utilization of resources and medicines, disability days, alcohol and tobacco use, physical activity, seatbelt use, family disease history, physical measurement of blood pressure, cardiorespiratory fitness, height, weight and skinfold, and demographic and socioeconomic characteristics. Frequency Conducted in 1978–79. Availability of Data tapes and statistical reports. data Statistics Canada Contact R.H. Coats Building, 18th Floor Ottawa, K1A 0T6, Canada Phone: (613) 951-1746 FAX: (613) 951-0792

Title General Social Survey Responsible Statistics Canada agency or ministry To gather data on social trends in order to monitor changes in Canadian society over time and to provide information on Objective specific policy issues of current or emerging interest. Noninstitutionalized population of persons 15 years of age and older, excluding residents of the Northwest Territories, Scope Indian reserves, and remote areas as defined by the Canadian Labour Force Survey. Exclusions account for about 3 percent of the entire population. Approximately 10,000 households (13,000 persons); random digit-dialing telephone sample: personal interview sampling frame drawn from the Labour Force Survey. Collection method Telephone interviews with persons 15–64 years of age, and personal interviews with persons 65 years of age and older. Data content Health status measures, disability, health care services, physical activity, alcohol and tobacco use, height and weight, social support and the elderly, and demographic and socioeconomic characteristics. Frequency Conducted in 1991. Continuous cycles of 6-year in core area. Data content has been transferred to the National Population Health Survey. Availability of Data tapes and statistical reports (charges apply). data Statistics Canada Contact Housing, Family and Social Statistics Division Ottawa, K1A 0T6, Canada Phone: (613) 951-9180 (613) 951-0387 FAX:

Title Health and Activity Limitation Survey Responsible Statistics Canada agency or ministry To gather data on the prevalence of disability according to the functional definitions of disability and handicap accepted by Objective the World Health Organization. These data are to aid in the building of a national database on disability. Scope All persons with a physical or psychological disability who were living in Canada at the time of the 1986 census. These persons were identified by a review of the responses to the disability question on the census form. The household survey sample was approximately 184,500 persons. Of the 1,100 institutions surveyed, a sample of 19,100 persons was selected. Collection method Interviewer-administered questionnaire and telephone interviews for some screening questions. Activity limitations, nature and prevalence of disability or handicap, special aids used or required, transportation, education Data content and employment status and needs for special accommodations, recreation and lifestyle, and economic characteristics. Conducted in 1991. Frequency Availability of Data tapes and statistical reports (charges apply). data Contact Statistics Canada, Post-Censual Surveys Program 9C-8 Jean Talon Building Ottawa, K1A 0T6, Canada Phone: (613) 951-4414 (613) 951-2906 FAX:

Title	Canadian Health and Disability Survey
Responsible agency or ministry	Statistics Canada
Objective	To gather data on the prevalence of disability according to the functional definitions of disability and handicap accepted by the World Health Organization.
Scope	As a supplement to the Labour Force Survey (LFS), a sample of disabled persons 15 years of age and older was identified by a screening questionnaire that was administered to five-sixths of the LFS. Of the 126,686 persons surveyed in 65,800 households, 15,854 were identified as having some form of disability and were then interviewed.
Collection method	Interviewer-administered questionnaire.
Data content	Nature and prevalence of disability or handicap, special aids used or required, education, transportation and employment status and needs of the disabled, and demographic and socioeconomic status.
Frequency	Conducted in 1983–84.
Availability of data	Data tapes and statistical reports (charges apply).
Contact	Statistics Canada Disability Database Development Project R.H. Coats Building, 17th Floor Ottawa, K1A 0T6, Canada Phone: (613) 951-2990 FAX: (613) 951-0792

Title	Health Promotion Survey
Responsible agency or ministry	Health and Welfare Canada
Objective	To provide information for planning and development of the Health Promotion Program.
Scope	Approximately 11,000 persons 15 years of age and older of the noninstitutionalized population, excluding residents of the Northwest Territories.
Collection method	Random digit-dialing telephone interview.
Data content	Health status, self-reported body measurements, exercise, smoking and alcohol consumption, drug use, safety, preventive health practices, nutrition, recent and intended efforts to improve health status, selected practices of peers, and demographic and socioeconomic characteristics.
Frequency	Every 5 years. Conducted in 1990.
Availability of data	Data tapes and statistical reports (charges apply).
Contact	Health and Welfare Canada Health Promotion Studies Unit Brooke Claxton Building Ottawa, K1A 1B4, Canada Phone: (613) 954-3354 FAX: (613) 990-7097

Title National Population Health Survey Responsible Statistics Canada agency or ministry Objective To aid in the development of public policies designed to improve health, to provide data for analysis of the determinants of health, to collect data on the correlates of health, to increase understanding about health status in relation to services, to provide panel data and periodic cross-sectional estimates, to provide data users with the capacity to supplement sample or content in a health survey, and to allow linkage to other health data sources. Noninstitutionalized population, 10 provinces and 2 territories (all ages), excluding natives on reserves. Exclusions account Scope for approximately 3 percent of total population. Approximately 22,000 households will be sampled. One person in each household will be randomly selected to participate in the longitudinal portion of the survey. Computer-assisted personal interview. Collection method Data content Health care utilization, injuries, restriction of activities, chronic conditions, preventive health practices, health status, smoking, alcohol, drug use, stress (ongoing, childhood, adult, recent life events, and work), mastery, social support, self-esteem, mental health, physical activities, height and weight, pets and safety, income, and sociodemographic characteristics. Frequency Biennial, starting in 1994. For some data from previous years, see The General Social Survey. Availability of Microdata file and statistical reports in mid-1995. data Contact Statistics Canada National Population Health Survey R.H. Coats Building, 24th Floor

Ottawa, K1A 0T6, Canada Phone: (613) 951-3830

FAX: (613) 951-4198

China, People's Republic of

Title National Sample Survey on the Situation of Children

Responsible agency or ministry

State Statistical Bureau
Organization of Rural Social and Economic Surveys
Organization of Urban Social and Economic Surveys

Objective To provide information about the health and living conditions of children in China.

Scope Stratified two-stage cluster sample of approximately 40,000 households in 30 provinces, autonomous regions, and cities.

Collection method Interviewer-administered questionnaire.

Data content Health conditions, disabilities, health care, hospitalizations, environmental living conditions, and demographic and

socioeconomic characteristics.

Frequency Conducted in 1987 and 1992. Planned for every 5 years.

Availability of data

Statistical reports.

Contact Jianwu Wen

International Statistical Information Center

State Statistical Bureau 38 Yuetan Nanjie Sanlihe Beijing

People's Republic of China Phone: (86) (1) 3266600-2810 FAX: (86) (1) 3266600-2810

Czech Republic

Title

Health Interview Survey, Czech Republic, 1993 (HIS CR 93)

Responsible agency or ministry

Institute of Health Information and Statistics of the Czech Republic

Objective

To acquire basic characteristics of the population's health for monitoring the World Health Organization project "Health for All by the Year 2000," and to determine the frequency in which a disease, symptom, phenomenon, or health complaint actually occurs among the population or its subgroups.

Scope

Multistage random stratified sample of 1,600 persons 15 years of age and older from the Central Register of Inhabitants of the Czech Republic.

Collection method

Interviewer-administered questionnaire.

Data content

Perceived physical, mental, and social health; prevalence of chronic diseases; disability; leisure-time activities; alcohol and smoking habits; dietary habits; health insurance; and demographic and socioeconomic characteristics.

Frequency

Conducted in 1993.

Availability of data

Preliminary statistical report presenting the survey findings in Czech only (translation, charges apply).

Contact

Vlasta Mazánková Institute of Health Information and Statistics of the Czech Republic Palackého Nám. 4 - P.O. Box 42 Prague 2 Czech Republic

Phone: (42) (2) 2497 2243 FAX: (42) (2) 2491 5982

Czech Republic

Title Reproductive Health Survey

Responsible agency or ministry

Czech Statistical Office Ministry of Health

Objective

To gather data on a wide range of topics related to reproductive health in the Czech Republic. Most issues are examined for women with specific geographic, social, demographic, and economic characteristics. This makes it possible to identify the portions of the population with specific health needs or problems.

Scope

Of the 12,747 households selected, 4,870 were found to include at least one woman of reproductive age. Of this number, approximately 4,497 were successfully interviewed.

Collection method

Female interviewer-administered questionnaire.

Data content

Childbearing, knowledge and use of contraceptive methods, use of maternal and child health services, sexuality and contraception among young adults, women's health habits, knowledge and attitudes about reproductive topics, knowledge about HIV/AIDS, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1993.

Availability of data

Preliminary report published in 1993. Final report will be in 1994.

Contact

Czech Statistical Office Sokolovská 142 186 13 Prague 8 Czech Republic Phone: (42) (2) 839 542

FAX: (42) (2) 826 489

Czech Republic

Survey of Treated Morbidity Title Responsible Institute of Health Information and Statistics agency or ministry **Objective** To determine the distribution of incidence of chronic diseases, congenital anomalies, permanent sequelae of diseases and injuries, and incidence of acute diseases and injuries. Scope Sample (born on seventh day of an odd month) yielded 131,097 inhabitants (1.64 percent of the total population of the Czech Republic). Collection method Questionnaire filled in by all general practitioners. **Data content** Prevalence of chronic diseases, congenital anomalies, permanent sequelae of diseases, incidence of acute illness and injuries, disability, hospitalizations, medications taken, and demographic and socioeconomic characteristics. Proposed every 5 years. Conducted in 1986. Frequency Availability of Published statistical reports presenting the survey findings in Czech only (translation, charges apply). data Vlasta Mazánková Contact Institute of Health Information and Statistics of the Czech Republic Palackého Nám. 4 - P.O. Box 42 Prague 2, Czech Republic Phone: (42) (2) 2497 2243

(42) (2) 2491 5982

FAX:

Denmark

Title The Danish Health and Morbidity Survey

Responsible agency or ministry

Danish Institute for Clinical Epidemiology
Center for Studies in Health and Health Services

Objective

To provide national data on the health, illness, illness behavior, and health behavior of the adult population of Denmark.

Scope

Simple probability sample of 6,000 persons every 3-4 years. The sample is drawn from all of the population 16 years of age and older from the central population register.

Collection method

Interviewer-administered questionnaire.

Data content

Core component—chronic illnesses, 2-week prevalence of symptoms, complaints and injuries (acute illnesses), long- and short-term disabilities, perceived health, use of health services, illness behavior, health promotion behavior (dietary habits, exercise, etc.), health-risk behavior, and demographic and socioeconomic status. Supplementary component—every second survey focuses on specific general topics. Each survey also includes more specific topics.

Frequency

Every 3-4 years. Conducted in 1986-87 and 1994.

Availability of data

Statistical reports and data files according to specific agreement.

Contact

Niels Kr. Rasmussen and Mette Kjøller Danish Institute for Clinical Epidemiology 25, Svanemøllevej 2100 Copenhagen Ø, Denmark

Phone: (45) (31) 20 77 77 FAX: (45) (31) 20 80 10

Denmark

Title

Population Survey on Prevention of Musculoskeletal Disorders

Responsible agency or ministry

Danish Institute for Clinical Epidemiology Center for Studies in Health and Health Services

Objective

To provide data from the adult population on health promotion behavior and illness behavior in relation to musculoskeletal disorders and to describe the prevalence and health consequences of discomfort, symptoms, and diseases in the muscles and skeletal system.

Scope

Simple probability sample of 6,000 persons 16 years of age and older. The sample is drawn from the central population register.

Collection method

Interviewer-administered questionnaire.

Data content

Health promotion behavior regarding low-back pain (knowledge and handling of risk factors, actual behavior, and attitude towards prevention of low-back pain), self-assessed health status and quality of life, illness behavior, use of health services, activity limitations, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1990–92. The survey forms part of the Danish Institute for Clinical Epidemiology's regular health and morbidity survey program every 3–4 years, alternately as general health and morbidity surveys and as health surveys on specific topics.

Availability of data

Statistical reports in Danish and data files according to specific agreement.

Contact

Mette Kjøller
Danish Institute for Clinical Epidemiology
25, Svanemøllevej
2100 Copenhagen Ø, Denmark

Phone: (45) (31) 20 77 77 FAX: (45) (31) 20 80 10

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Title National Health Interview Survey Responsible Estonian Statistical Office Ministry of Social Affairs agency or ministry To provide national data on health, illnesses, nutrition, social contacts, consumption of alcohol, smoking habits, Objective psychological well-being, and health habits. Probability sample of 5,000 individuals 16 years of age and older. Scope **Collection method** Interviewer-administered questionnaire. Fixed core data component—composition of household, nutrition, chronic illness, physician visits, medical insurance, **Data content** consumption of alcohol, smoking habits, physical activities, lifestyle, disability, psychological well-being, health habits, and demographic and socioeconomic characteristics. Frequency Every 8 years beginning in 1996. Availability of Public-use data files and statistical reports presenting the survey findings. data Contact Jüri Uljas Living Conditions Section Estonian Statistical Office EE-0100 Tallinn, Estonia Phone: (372) (2) 452-882 FAX: (372) (2) 453-923

Estonia

Title Living Conditions Survey

Responsible agency or ministry

Estonian Statistical Office Ministry of Social Affairs

Objective

To provide national data on living conditions, health, social contacts, composition of households, sense of security, workplace conditions, economic situation, and migration.

Scope

Multistage probability sample of 5,000 individuals 18-74 years of age.

Collection method

Interviewer-administered questionnaire.

Data content

Fixed core data component—composition of household, work, nutrition, chronic illness, physician visits, hospital episodes, medical insurance, alcohol consumption, smoking habits, physical activities, lifestyle, and demographic and socioeconomic characteristics. Supplementary component—varies from year to year.

Frequency

Every 4 years beginning in 1994.

Availability of data

Public-use data files and statistical reports presenting the survey findings.

Contact

Viive Maasalu Head, Living Conditions Section Estonian Statistical Office EE-0100 Tallinn, Estonia Phone: (372) (2) 450-331 FAX: (372) (2) 453-923

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Title Mini-Finland Health Survey Responsible Social Insurance Institution of Finland and agency or ministry the Institute of Public Health Objective To produce information that serves to promote, monitor, and project the health status and the functional and work capacity of the general population. The original Mini-Finland Health Survey was a two-stage stratified cluster sample of the population 30 years of age and Scope older; approximately 8,000 persons. Followup studies have had varying size samples. Collection method Interviewer-administered questionnaire, health examination, and a comprehensive clinical examination to a subsample of 800 persons. Data content Interview phase—perceived morbidity, chronic conditions, functional ability, limitations, disability, utilization of health services, use of drugs, dental health, health behavior, and demographic characteristics. Health examination phase medical history, chest x ray, physical examination, electrocardiogram (ECG), blood and urine tests, tests for muscle strength, locomotor system tests, tests to assess mental health, psychic and psychomotor performance, and dental examination. Frequency Conducted in 1977-81. Availability of Statistical reports and main results in several publications. data Contact Arpo Aromaa Social Insurance Institution of Finland Research and Development Centre and The Institute of Public Health Mannerheim 166 FIN-00330 Helsinki, Finland Phone: (358) (0) 434 3560 FAX: (358) (0) 474 4760

Finland

Title

Population Health Survey (previously Finnish Health and Social Security Survey)

Responsible agency or ministry

The Social Insurance Institution of Finland

Objective

To evaluate the health needs of the population and the extent to which they are being met, as well as the effects of the health care/health insurance changes implemented in the early 1990's.

Scope

6,000 households representing the entire population.

Collection method

Interviewer-administered questionnaire.

Data content

Health care utilization, family medical expenses, levels of morbidity, prevalence of chronic conditions, incidence of acute illnesses, extent of disabilities, doctor and dental visits, and demographic and socioeconomic status.

Frequency

1995 (previous surveys conducted in 1964, 1968, 1976, and 1987).

Availability of data

Preliminary data available, statistical reports will be published in 1997.

Contact

Timo Klaukka and Risto Lehtonen Social Insurance Institution of Finland Research and Development Centre P.O. Box 450 00101 Helsinki, Finland

Phone: (358) (0) 434 3592 (358) (0) 434 3563

FAX: (358) (0) 434 1700

France

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Title	French Health Survey	
Responsible agency or ministry	Institut National de la Statistique et des Études Économiques (INSEE)	
Objective	To provide national data on the health care utilization of the noninstitutionalized population of France.	
Scope	Sample of 8,000 households covering about 21,000 persons. Subsample of 8,000 persons (1 per household) for a special treatment of the data.	
Collection method	Interviewer-administered questionnaire and 12 weeks health care consumption diary filled out by patients.	
Data content	Physician visits, medical consumption, pharmaceuticals, hospitalization, health status, and demographic and socioeconomic characteristics.	
Frequency	Decennial. Conducted in 1960, 1970, 1980, and 1991–92.	
Availability of data	Statistical reports presenting the survey findings.	
Contact	Institut National de la Statistique et des Études Économiques (INSEE) 18 Boulevard Adolphe Pinard 75675 Paris Cedex 14, France Phone: (33) (1) 41 17 50 50 FAX: (33) (1) 41 17 66 66	

France

Title Health Survey Social Protection

Responsible agency or ministry

Centre de Recherche, d'Étude et de

Documentation en Économie de la Santé (CREDES)

Objective

To provide national data on the health care utilization of the noninstitutionalized population of France.

Scope

Sample of 7,800 persons.

Collection method

Interviewer-administered questionnaire and 4 weeks health care consumption diary filled out by patients.

Data content

Medical consumption, pharmaceuticals, hospitalization, health status, and demographic and socioeconomic characteristics.

Frequency

Annual since 1988.

Availability of data

Statistical reports presenting the survey findings.

Contact

Pierre-Jean Lancry CREDES

1 rue Paul-Cézanne 75008 Paris, France

Phone: (33) (1) 40 76 82 10 FAX: (33) (1) 45 63 57 42

France

Title National Inpatients Survey

Responsible agency or ministry

Centre de Recherche, d'Étude et de

Documentation en Économie de la Santé (CREDES)

Objective

To provide national data on the health care utilization of the hospitalized population of France.

Scope

Sample of 5,000 persons.

Collection method

Hospital-based doctor-administered questionnaire.

Data content

Medical consumption, pharmaceuticals, hospitalization, health status, and demographic and socioeconomic characteristics.

Frequency

Decennial. Conducted in 1981 and 1991-92.

Availability of data

Statistical reports presenting the survey findings.

Contact

Pierre-Jean Lancry CREDES 1 rue Paul-Cézanne 75008 Paris, France

Phone: (33) (1) 40 76 82 10 FAX: (33) (1) 45 63 57 42

Germany

Title

Questions on Health-Microcensus Supplementary Survey

Responsible agency or ministry Federal Statistical Office

Objective

To provide national data on illness and accidental injury rates of the population.

Scope

Representative sample survey of the population of the entire country. The yearly microcensus basic program is a 1 percent sample survey (households included institutionalized population) with a compulsory response. The supplementary program entitled Questions on Health is a 0.5 percent sample survey with voluntary response. The microcensus basic program is composed of a large number of sociodemographic and socioeconomic variables as well as regional characteristics.

Collection method

Interviewer-administered questionnaire.

Data content

Since 1986 a "core data" component includes duration of illness or accidental injury, kind of accident, kind and duration of treatment, and duration of incapacity for work. Varying issues component includes health precautions and health risks. In 1989, 1992, and 1995, these questions concerned smoking habits and the use of iodized salt.

Frequency

Irregular intervals up to 1963. Every 3 years since 1986. Conducted in 1989, 1992, and 1995.

Availability of data

Public-use publications (papers, special editions) and special analyses on request (charges apply).

Contact

Federal Statistical Office Section Health Statistics D-65180 Wiesbaden, Germany Phone: (49) (611) 75 23 55

FAX: (49) (611) 72 40 00

Hungary

Title Health Behavior Survey

Responsible agency or ministry

Central Statistical Office

ObjectiveTo provide information on the frequency of risk factors relating to chronic illnesses and sicknesses.

Scope Stratified multistaged sample of 5,476 persons 15–64 years of age.

Collection method Interviewer-administered questionnaire.

Data content Chronic conditions, nutrition, smoking habits, alcohol consumption, physical activity, and demographic and socioeconomic

characteristics.

Frequency Conducted in 1994.

Availability of data

Statistical reports.

Contact Dr. Péter Józan

Central Statistical Office

Division of Population and Health Statistics

5-7 Keleti Károly Street

P.O. Box 51

H-1525 Budapest, Hungary Phone: (36) (1) 212 68 90 FAX: (36) (1) 212 66 78

Hungary

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Title	Health Interview Survey
Responsible agency or ministry	Central Statistical Office
Objective	To provide data on the population's state of health and the influencing and determining factors relating to chronic illnesses and sicknesses.
Scope	Stratified multistaged sample of 16,000 addresses covering about 37,500 persons. Noninstitutionalized population of persons aged 15 years and older are interviewed.
Collection method	Interviewer-administered questionnaire.
Data content	Health complaints, utilization of health services, nutrition, smoking habits, medicine consumption, practicing sports, working conditions, occupational hazards, and demographic and socioeconomic characteristics.
Frequency	Conducted in 1986 and 1993.
Availability of data	Statistical reports.
Contact	Dr. Péter Józan Central Statistical Office Division of Population and Health Statistics 5-7 Keleti Károly Street P.O. Box 51 H-1525 Budapest, Hungary Phone: (36) (1) 135 35 42 FAX: (36) (1) 201 87 39

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Title Survey of Living Conditions in Iceland Responsible Statistical Bureau of Iceland agency or ministry **Objective** To provide information on the living conditions of the nation, how people live, and their housing, employment, working conditions, income, leisure and spare time, education, social relations, and health. Scope Random sample from the National Register of 2,000 persons 16-75 years of age. Collection method Interviewer-administered questionnaire. Health factors—prevalence of chronic diseases and impairments, disability, and demographic and socioeconomic Data content characteristics. Frequency Conducted in 1988. Availability of Statistical reports presenting the survey findings. data Contact Ms. Sigríður Vilhjálmsdóttir Statistics Iceland Skuggasund 3 IS-150 Reykjavík, Iceland Phone: (354) 560 9800 (354) 562 8865 FAX:

Israel

Title Use of Health Services Survey

Responsible agency or ministry

Central Bureau of Statistics

Objective

To provide national data on the use and users of ambulatory health services of the civilian noninstitutionalized population, as well as health insurance coverage.

Scope

Approximately 6,000 households covering about 22,000 persons of all ages were included in the survey. The survey includes all households sampled in the Labor Force Survey; excluded were kibbutzim, Bedouins in the Negev, soldiers in the regular army service, and persons residing in institutions.

Collection method

Interviewer-administered questionnaire.

Data content

Visits to general physicians and specialists in ambulatory clinics, length of wait for hospital admission, use of preventive health services, breast-feeding habits, health insurance, and demographic and socioeconomic characteristics.

Frequency

Variable. Conducted in 1977, 1981, and 1993.

Availability of data

Public-use tapes, statistical reports presenting the survey findings.

Contact

Mrs. Pnina Zadka
Prime Minister's Office
Central Bureau of Statistics
Hakirya-Romena, P.O.B. 13015
Jerusalem 91130, Israel
Phone: (972) (2) 6553 553
FAX: (972) (2) 6553 266

Israel

Title

Survey of the Elderly (Persons Aged 60 and Over in Households)

Responsible agency or ministry

Central Bureau of Statistics

Objective

To supply various institutions with data that will help them in the evaluation and planning of services and allocation of resources in various fields of health, welfare, housing, work, and social aspects, and will serve as a basis for the planning of follow-up surveys.

Scope

The target population included persons aged 60 years and over, who resided permanently in Israel in urban localities only, and who lived permanently in regular households, sheltered housing for the elderly, and households within institutions, hotels, and boarding houses. A sample frame was drawn from the 1983 Census of Population and Housing of all persons living in a household aged 60 years and over. Approximately 3,300 households were included.

Collection method

Interviewer-administered questionnaire.

Data content

Housing conditions, attitudes towards living in a home for the aged, health condition, physical condition, disability, smoking and nutrition habits, utilization of health services, patterns and ability in instrumental activities of daily living, leisure activity and voluntary activity, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1982 and 1985.

Availability of data

Public-use tapes, statistical reports presenting the survey findings.

Contact

Prime Minister's Office Central Bureau of Statistics Hakirya-Romena, P.O.B. 13015 Jerusalem 91130, Israel Phone: (972) (2) 6553 553

FAX: (972) (2) 6553 266

Mrs. Pnina Zadka

V

Title The Survey of Health Conditions of the Population and the Use of Health Services Responsible The National Institute of Statistics agency or ministry **Objective** To gather information about the health status and medical consumption of the population of Italy. Scope Two-stage sampling design with municipalities being the primary sampling units; 25,000 households covering 75,000 persons. Interviewer-administered questionnaire. Collection method Data content Acute and chronic sickness, symptoms, medical examinations, doctor consultations, hospital stays, medicines, smoking, drinking, physical activity, and demographic and socioeconomic characteristics. Frequency Conducted in 1980, 1983, 1986, 1990-91, and 1994. Availability of Public-use tapes, statistical reports presenting survey findings. data Contact Vittoria Buratta Viale Liegi 13 00198 Rome, Italy Phone: (39) (6) 8541059 FAX: (39) (6) 85354401

Japan

Title Comprehensive Survey of Living Conditions of People on Health and Welfare Responsible Ministry of Health and Welfare agency or ministry **Objective** To provide data of living conditions, health status, pensions, welfare, and incomes of the Japanese population. This data will be used for policy planning and to manage health and welfare administration. Stratified random sample of all households and household members in 5,240 districts. Approximately 250,000 households Scope and 780,000 household members are surveyed. Collection method Interviewer-administered questionnaire on household and income; self-administered questionnaire on health and savings. Health status, chronic diseases, acute illnesses, bed days, quality of life, and demographic and socioeconomic Data content characteristics. Frequency Every 3 years, beginning in 1986. Availability of Public-use summary data files and statistical reports. data Contact Statistics and Information Department Minister's Secretariat Ministry of Health and Welfare 7-3 Ichigaya-Honmura-Cho Shinjuku-ku, Tokyo 162, Japan Phone: (81) (3) 3260-3181 (ext. 353) FAX: (81) (3) 3269-8824

Title National Health Interview Survey

Responsible agency or ministry

Korean Institution for Health and Social Affairs

Objective To provide national data on kinds of morbidity, morbidity level, and utilization of medical service by region and social

stratum, and health services utilization and satisfaction.

Scope Survey of 6,605 households.

Collection method Interviewer-administered questionnaire.

Data content Prevalence of chronic diseases, incidence of acute illnesses, bed days, hospitalizations, utilization of health services,

health expenditures, and demographic and socioeconomic characteristics.

Frequency Triennial since 1983.

Availability of data

Statistical reports (Korean language only).

Contact Health Research Department

Korean Institution for Health and Social Affairs

42-14, Pulgwang-dong, Unp'yong-gu

Seoul, 122-040 Republic of Korea

Phone: (82) (2) 355-8003 FAX: (82) (2) 352-2181

Title National Nutrition Survey

Responsible agency or ministry

Ministry of Health and Welfare

ObjectiveTo provide national data on health and nutrition conditions of the population.

Scope Probability sample of 2,000 households covering about 7,215 persons.

Collection method Observational.

Data content Nutrient intake, food intake, physical standard condition, hemoglobin level, blood pressure, living environment, and

demographic and socioeconomic characteristics.

Frequency Annual since 1969.

Availability of data

Statistical reports (Korean language only).

Contact Health Policy Division

Ministry of Health and Welfare 1, Jungang-dong, Kwachon-shi Kyounggi-do, 427-760

Republic of Korea

Phone: (82) (2) 503-7538 FAX: (82) (2) 503-1394

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Title	Patients Survey	
Responsible agency or ministry	Ministry of Health and Welfare	
Objective	To provide national data on disease conditions of the population and use of medical institutions.	
Scope	Census of 984 general hospitals, health centers, etc. Sample of 5,267 clinics, health subcenters, etc. Survey includes patients who use these institutions during the survey period.	
Collection method	Interviewer-administered questionnaire.	
Data content	Hospital data—name, number of beds, medical personnel. Patient data—diagnosis, medical treatment period and results, doctor's fee, age, and sex.	
Frequency	Biennial since 1969.	
Availability of data	Statistical reports (Korean language only).	
Contact	E.D.P.S. and Statistics Office Ministry of Health and Welfare 1, Jungang-dong, Kwachon-shi Kyounggi-do, 427-760 Republic of Korea Phone: (82) (2) 503-7526	

FAX: (82) (2) 503-7568

Title

Social Statistics Survey

Responsible agency or ministry

National Statistical Office

Objective

To obtain supplementary data and information for replenishing social indicators. The particular emphasis of this survey is to collect as much experimental and subjective information as possible.

Scope

Sample of 34,000 households selected from 1,090 enumeration districts that were selected from 185,247 enumeration districts of the 1990 population census.

Collection method

Interviewer-administered questionnaire.

Data content

Health—self-assessment of blood pressure, health and obesity, alcohol consumption, smoking habits, medical service satisfaction, medical consultations and treatments, bed days, and demographic and socioeconomic characteristics. Housing and environment— methods of purchasing housing and residential quarters, frequency of moves, desired types of housing, levels of satisfaction and reasons for dissatisfaction with housing and residential quarters, commuting time and means of commute to and from work and school, evaluation of environmental pollution, endeavor for environmental protection, drinking water, and attitudes towards safety of agricultural products.

Frequency

Annual since 1977.

Availability of data

Statistical reports (Korean and English).

Contact

Social Statistics Division
National Statistical Office
647-15 Yoksam-dong, Kangnam-gu
Seoul, 135-080
Republic of Korea

Phone: (82) (2) 222-1879 FAX: (82) (2) 538-6348

Latvia

Title

Epidemiologic Research on Most Common

Noninfectious Diseases

Responsible agency or ministry

Latvian Academy of Medicine; Latvian Institute of Cardiology; Health Department of the Ministry of Welfare of Latvia

Objective

To assess prevalence of most common noninfectious diseases and their risk factors in Latvia.

Scope

Multistage random sample of 18,040 permanent inhabitants of Latvia 25 years of age and over (5-year sex/age groups). Data were obtained on 5,449 persons.

Collection method

Interviewer-administered questionnaire and objective measurements.

Data content

Seventeen groups of questions, sociodemographic data, risk factors, questions related to diseases and syndromes (169 questions and 94 subquestions). Blood sample (total cholesterol, triglycerides, glucose before and 90 minutes after 75.0 glucose load); AT; electrocardiogram (ECG); height; and weight.

Frequency

Conducted in 1991.

Availability of data

Published reports in 1993. Ongoing data analysis.

Contact

G. Brigis
Department of Public Health and Epidemiology

Latvian Academy of Medicine

16, Dzirciema Street Rīga LV 1007, Latvia Phone: (371) 2229215

FAX: (371) 8828155

Latvia

Title Living Conditions Survey Responsible Central Statistical Bureau of Latvia: The Norweigian Institute for Applied Social Science agency or ministry To contribute necessary and reliable information on the real conditions of people's life in Latvia. Objective Sample size of 3,500 respondents who are permanent inhabitants of Latvia, 18 years of age and over. Scope Collection method Interviewer-administered questionnaire. Housing, education, employment, labour conditions, health status, health care utilization, security, crime and violence, Data content migration, social life and activity, public opinion, and demographic and socioeconomic characteristics. Frequency 1994. Preliminary report published in 1994. Final report published in late 1995. (In Latvian and English). Availability of data Inta Vasaraudze Contact Department of Social Statistics Central Statistical Bureau of Latvia 1, Läčplēša Street Rīga LV 1301, Latvia Phone: (371) 366847 (371) 7830137

FAX:

Netherlands

Title

National Health Interview Survey

Responsible agency or ministry

Statistics Netherlands

Objective

To supply basic information on how people experience their own state of health, the factors that influence this, social and economic consequences of being ill, and how health care facilities are used by the overall population. The data serve as background for policy and planning purposes.

Scope

Random sample of 3,000 households covering approximately 9,000 persons per year. Noninstitutionalized population of all residents (maximum of 4) in the selected household. Excludes persons in nursing homes, convents, homes for the elderly, prisons, shelters, and those belonging to the sailing population or not having a fixed abode.

Collection method

Interviewer-administered questionnaire and self-administered questionnaire.

Data content

"Core data" component—acute sickness, long-term disabilities, symptoms, activities of daily living, doctor consultations, dentist consultations, hospital stays, medicines, absence from work, insurance, and demographic and socioeconomic characteristics. Supplementary component—varies from year to year.

Frequency

Continuous since 1981.

Availability of data

Statistical reports presenting survey findings.

Contact

Dr. P.C.J. Everaers
Statistics Netherlands
Division of Sociocultural Statistics
Department of Sociocultural Household Surveys
P.O. Box 4481
6401 CZ Heerlen, The Netherlands

Phone: (31) (45) 707477 FAX: (31) (45) 726274

Netherlands

Title

Quality of Life Survey

(previously named Well-being of the Population)

Responsible agency or ministry

Statistics Netherlands

Objective

To give descriptions of distribution of socioeconomic characteristics, working and housing conditions, leisure activities, environmental factors, social participation, and health and well-being. The data serve as background for policy and planning purposes.

Scope

Random sample of households, covering approximately 3,500 persons per year (1 person per household) of residents 18 years of age and over. Excludes persons in homes for the elderly, nursing homes, convents, prisons, shelters, and those belonging to the sailing population or not having a fixed abode.

Collection method

Interviewer-administered questionnaire.

Data content

Household composition, socioeconomic characteristics, quality of employment, housing conditions, leisure activities, environmental behavior and perception, participation in society, health status, medical consumption, lifestyle and risk factors, and social interaction.

Frequency

Conducted every third year, 1974-86. Continuous since 1989.

Availability of data

Statistical reports presenting survey findings.

Contact

Dr. F. Ossen

Statistics Netherlands

Division of Sociocultural Statistics

Department of Sociocultural Household Surveys

P.O. Box 4481

6401 CZ Heerlen, The Netherlands

Phone: (31) (45) 707275 FAX: (31) (45) 726274

Netherlands

Title

National Health Interview Survey of Turkish

Inhabitants in the Netherlands

Responsible agency or ministry

Statistics Netherlands

Objective

To supply basic information on the Turkish population in the Netherlands on how people experience their own state of health, the factors that influence this, consequences of being ill, and how health care facilities are used by the overall population. The data serve as background for policy and planning purposes.

Scope

Random sample covering 5,306 Turkish residents in the Netherlands. Noninstitutionalized population of all residents in the selected household. Excludes persons in nursing homes, convents, homes for the elderly, prisons, shelters, and those belonging to the sailing population or not having a fixed abode.

Collection method

Interviewer-administered questionnaire.

Data content

Acute sickness, long-term disabilities, symptoms, activities of daily living, doctor consultations, dentist consultations, hospital stays, medicines, absence from work, insurance, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1989–90.

Availability of data

Statistical reports presenting survey findings.

Contact

Dr. P.C.J. Everaers
Statistics Netherlands
Division of Sociocultural Statistics
Department of Sociocultural Household Surveys
P.O. Box 4481
6401 CZ Heerlen, The Netherlands

Phone: (31) (45) 707477 FAX: (31) (45) 726274

New Zealand

Title

Household Health Survey

Responsible agency or ministry

Ministry of Health

Objective

To measure health service use not currently recorded in the national statistics and the factors that influence level of use, to obtain data on health services use according to sociodemographic variables, to measure individual's satisfaction and perceptions of their health services, to measure individual's health status and unmet need for health services, and to provide information on selected health behavior not nationally available at present.

Scope

Stratified random sample of 6,825 persons. Civilian noninstitutionalized population of all ages residing in private households. One respondent per household will be interviewed.

Collection method

Interviewer-administered questionnaire.

Data content

Use of primary care services, use of hospital services, health-related behavior, exercise, smoking and alcohol consumption, long-term illness and disability, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1992-93 (intended to be repeated every 3-5 years).

Availability of data

Statistical reports (charges apply).

Contact

Health Research and Analytical Services Ministry of Health P.O. Box 5013

Wellington, New Zealand Phone: (64) (4) 496 2000 FAX: (64) (4) 801 2769

Norway

Title **Health Survey** Statistics Norway (formerly Central Bureau of Statistics) Responsible agency or ministry To obtain knowledge of health problems in the Norwegian population as a whole and to reveal inequalities regarding health Objective conditions between different groups in the population. Also to trace the use of health services. Two-staged, stratified probability sample of 5,100 households covering 13,100 persons. All persons were interviewed Scope (parent or adult responsible for the child was the usual respondent for children under 15 years of age). Collection method Interviewer-administered questionnaire and self-administered questionnaire. Prevalence of chronic diseases, reduced activity, occurrence of acute illness in the last 14 days (for children and young Data content people only), contact with the health service, dental health, lifestyle, and demographic and socioeconomic characteristics. Conducted in 1968, 1975, 1985, 1995. Frequency Statistical reports presenting survey findings will be published at the end of 1996. Availability of data Leif Korböl/Liv Grötvedt Contact **Statistics Norway** Division for Health and Social Conditions P.O. Box 8131 Dep. N-0033 Oslo, Norway

Phone: (47) (22) 86 45 00

(47) (22) 86 49 73

FAX:

Norway

Survey of Level of Living Title Responsible Statistics Norway (formerly Central Bureau of Statistics) agency or ministry **Objective** To obtain knowledge of distribution of the level of living in the Norwegian population, including some health conditions. Two-staged sample covering 5,100 persons and approximately the same number of households. All persons 16 years of Scope age and over were interviewed (some questions were asked about the children in the household). Collection method Interviewer-administered questionnaire. **Data content** Chronic illness, mental health and long-term disability, working conditions, care and housework, housing conditions, social relations, and demographic and socioeconomic characteristics. Frequency Conducted in 1973, 1980, 1983, 1987, 1991, and 1995. Availability of Data will be published during 1996. data Contact Leif Korböl/Liv Grötvedt Statistics Norway Division for Health and Social Conditions P.O. Box 8131 Dep. N-0033 Oslo, Norway Phone: (47) (22) 86 45 00 FAX: (47) (22) 86 49 73

Norway

Title

Working Environment Survey

Responsible agency or ministry

Statistics Norway (formerly Central Bureau of Statistics)

Objective

To shed light on the main features of the working conditions and working environments as experienced by different groups of employees.

Scope

Based on the Companies Register and Employees Register for the second quarter of 1989, the sample was drawn in two stages; first, a sample of business establishments was drawn, then a sample of employees was drawn from among those establishments. 4,359 employees in 1,050 establishments were surveyed.

Collection method

Interviewer-administered questionnaire.

Data content

Health and symptoms, mental health, absence due to illness, organization working environment, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1989, 1993.

Availability of data

Statistical reports presenting survey findings.

Contact

Leif Korböl/Liv Grötvedt Statistics Norway Division for Health and Social Conditions P.O. Box 8131 Dep. N-0033 Oslo, Norway

Phone: (47) (22) 86 45 00 FAX: (47) (22) 86 49 73

Po	lar	h
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Title Disabled on the Labor Market in Poland Responsible Central Statistical Office agency or ministry **Objective** To provide data on the disabled persons position on the labour market. Scope 8,000 persons of 15 years of age and over who are included in the legal disabled groups. **Collection method** Interviewer-administered questionnaire. Disability, economic activity, standard of living, and demographic and socioeconomic data with special attention to health **Data content** state parameters. Frequency Conducted in 1995. Availability of Statistical and analytical reports in Polish. data Contact Mrs. Stanislawa Kostrubiec Central Statistical Office Division of Labour Al. Niepodleglości 208 Warsaw 00-925, Poland Phone: (48) (22) 25 59 78 (48) (22) 25 65 76 FAX:

Poland

Title Family Health Survey Responsible Central Statistical Office agency or ministry Institute of Cardiology Objective To provide information on some aspects of the health status of the population. Sample of 21,451 households covering about 68,000 persons. Scope **Collection method** Interviewer-administered questionnaire. Self-assessed health status, hospital stays and duration, impairments and disabilities, limitations of activities, chronic **Data content** diseases, smoking habits, sports training, and demographic characteristics. Frequency Conducted in 1987. Availability of Statistical reports. data Central Statistical Office Contact Al. Niepodleglości 208 Warsaw 00-925, Poland Phone: (48) (22) 25 18 02 (48) (22) 25 34 35 FAX: Mr. Janusz Bejnarowicz Institute of Cardiology Phone: (48) (22) 15 30 11, ext. 282

Poland

Title Household Health and Expenditure for Health Care

Responsible agency or ministry

Central Statistical Office

Objective To provide data on household expenditures for main health care.

Scope Sample of 3,800 households covering 12,500 persons.

Collection method Interviewer-administered questionnaire.

Data content Frequency of the utilization of main health services and expenditures for the services and demographic and socioeconomic

characteristics.

Frequency Conducted in 1994.

Availability of data

Report in Polish at the end of 1995.

Contact Mrs. Elżbieta Skotnicka Illasiewicz

Central Statistical Office

Division of Environment and Social Services

Al. Niepodleglości 208 Warsaw 00-925, Poland

Phone: (48) (22) 25 32 41, ext. 265

FAX: (48) (22) 25 90 78

Poland

Title

Sociodemographic and Health Determinants of Infant Mortality Survey

Responsible agency or ministry

Central Statistical Office Institute of Mother and Child

Objective

To provide information for the Government to create and implement a program aimed at reducing infant mortality and improving the health status of the mother, child, and family.

Scope

Sample includes 20 percent of those families who, during 1990, experienced the death of an infant, a stillbirth, or the birth of an infant unable to survive. As background for analysis, a control sample of 2 percent of live births was chosen proportionally in the same areas as the base group. A total of about 6,400 children under 1 year of age were selected.

Collection method

Interviewer-administered (mainly nurses) questionnaire.

Data content

Sociodemographic characteristics of the parents, pregnancy information, mother's opinion about delivery and medical assistance, state of infant at birth, cause of death, history of illness, type and quality of medical assistance, ecological and living conditions of family, and parent's health and lifestyle.

Frequency

Conducted in 1991.

Availability of data

Data tapes, statistical tables, report, and publication.

Contact

Mrs. Lucyna Nowak Central Statistical Office Demographic Statistics Division Al. Niepodleglości 208 Warsaw 00-925, Poland Phone: (48) (22) 25 17 03

FAX: (48

(48) (22) 25 34 35

Po	la	nd
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Title Social Status of Household Survey Responsible Central Statistical Office agency or ministry Objective To provide information on the social status of households and some aspects of the health status of the population. Scope Sample of 120,000 households covering about 380,000 persons. Collection method Interviewer-administered questionnaire. Data content Hospital stays and duration, impairments and disabilities, smoking habits, limitations of activities, curing effectiveness, access to chosen doctor, attitude of doctor to patient, and demographic characteristics. Frequency Conducted in 1985, 1986, 1989, and 1990. Survey includes a health component every fourth or fifth year. Availability of Data tapes and statistical reports published. data Contact Mrs. Maria Daszyńska Central Statistical Office Households Division Al. Niepodleglości 208 Warsaw 00-925, Poland Phone: (48) (22) 25 18 02 FAX: (48) (22) 25 34 35

Portugal

Title

National Health Survey

Responsible agency or ministry

Department of Health Studies and Planning Ministry of Health

Objective

To provide information on a number of major health problems.

Scope

Multistage probability sample of 20,000 households (1995–96 survey) covering noninstitutionalized persons living on the continent.

Collection method

Interviewer-administered questionnaire.

Data content

Fixed "core data" component—perceived general health, prevalence of some chronic conditions, disability, general health care, doctor visits, health expenses and income, physical activity, tobacco consumption, food and beverage consumption, child health, and demographic and socioeconomic characteristics. Supplementary component—varies with needs of information.

Frequency

All countries, 1987, 1995–96. Conducted in the Lisbon area in 1989; North area, 1990; Alentejo area, 1991; and Algarve area, 1993. Probability of surveys every 5 years at the national level, with regional surveys yearly.

Availability of data

Data files and main data tables presented in publication.

Contact

Luís Magão, M.D.
Inquérito Nacional de Saúde
Departamento de Estudos e Planeamento da Saúde
Av. Álvares Cabral, 25
1250 Lisboa, Portugal

Phone: (351) (1) 693792 FAX: (351) (1) 3885516

Title Behavioral Risk Factor Survey

Responsible agency or ministry

Objective

Scope

Frequency

Contact

Research and Evaluation Department Ministry of Health

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This survey is part of a comprehensive national surveillance system to monitor lifestyle risk factor levels related to the noncommunicable diseases that are the current diseases of importance.

Multistage sample of 2,530 Singapore residents 18 to 64 years of age in 7,100 households units.

Collection method Interviewer-administered questionnaire.

Data content Core questionnaire: Physical activity, alcohol consumption, self-reported height and weight, weight control, and demographic and socioeconomic characteristics.

Supplementary questionnaire: Use of medical services, utilization of traditional medicine, public awareness, and assessment of the national health financing scheme (Medisave).

Conducted in 1994 (to be repeated every 2 years). Next survey scheduled for 1996.

Availability of Statistical tabulations and highlights of survey findings (on request).

Dr. S.C. Emmanuel
Research and Evaluation Department
Ministry of Health
College of Medicine Building
16 College Road

Singapore 0316 FAX: (65) 224 1677

Responsible

Morbidity Survey of Outpatients

agency or ministry

Research and Evaluation Department

Ministry of Health and College of Family Physicians

Objective

Title

To provide information on the diseases treated at the outpatient level in both the private and public sectors to maximize the role of the public and private sectors in primary health care provision. Also to gather data on the patient-load of the public sector versus the private sector in primary health care provision in order to provide enhanced care for the leading diseases.

Scope

All 1,106 private general practitioners and all doctors working in the government primary health care clinics. A total of 23,000 patients were covered during the survey.

Collection method

Doctor- and nurse-administered questionnaire.

Data content

Diagnosis or medical complaints, request for medical leave certificate, employment status, type of housing, residential status, and other demographic characteristics.

Frequency

Conducted every 5 years beginning in 1988.

Availability of data

Statistical report on survey findings.

Contact

Dr. S.C. Emmanuel
Research and Evaluation Department
Ministry of Health
College of Medicine Building
16 College Road
Singapore 0316
FAX: (65) 224 1677

Title

National Health Survey

Responsible agency or ministry

Research and Evaluation Department

Ministry of Health

Objective

To determine the epidemiology of major noncommunicable diseases and their risk factors in the Singapore population, because these are the leading causes of sickness and death in the country.

Scope

Multistage sample of 3,568 Singapore residents 18-69 years of age.

Collection method

Interviewer-administered questionnaire, physical examination, biochemical measurements, and electrocardiography.

Data content

Prevalence of coronary heart disease (males above 35 years), diabetes mellitus, hypertension, and high blood cholesterol; blood chemistry; women's pap smear and breast examination; cigarette-smoking habits; physical activity; alcohol consumption; behavior of diabetics and hypertensives; and demographic and socioeconomic characteristics.

Frequency

Conducted in 1992 (to be repeated every 5-7 years). Next survey scheduled for 1998.

Availability of data

Survey highlights and tabulations (on request).

Contact

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College of Medicine Building
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Singapore 0316
FAX: (65) 224 1677

Title

National Survey of Senior Citizens

Responsible agency or ministry

Jointly conducted by Ministry of Health, Ministry of Community Development, and Department of Statistics

Objective

To provide updated national data on the problems and needs of the aged to assist in drawing up appropriate social and community services and health care programs for the elderly in Singapore. This is to cope with the rapid aging of the population that Singapore will face by the turn of the century.

Scope

Multistage sample of 6,000 persons aged 55 years and over living in households.

Collection method

Interviewer-administered questionnaire.

Data content

Biographic data, particulars of spouse and children, household characteristics, employment/retirement, finance, support systems, use of community services, personal care and daily needs, health status, elderly cognitive assessment, and principal carer.

Frequency

Conducted in 1983 and 1995.

Availability of data

Survey highlights and tabulations (on request).

Contact

Dr. S.C. Emmanuel
Research and Evaluation Department
Ministry of Health
College of Medicine Building
16 College Road
Singapore 0316
FAX: (65) 224 1677

Title Survey on Cigarette Smoking Among Singaporeans

Responsible agency or ministry

Research and Evaluation Department

Ministry of Health

Objective

As smoking is an important risk factor in the current diseases of importance and in view of the rising trend in smoking, this in-depth survey on smoking is carried out to determine the smoking prevalence and attitude and behavior of smokers in the Singapore population.

Scope

Multistage sample of 5,000 Singapore residents 18 to 64 years of age.

Collection method

Interviewer-administered questionnaire.

Data content

Frequency, duration, age of onset of smoking, reasons for picking up the smoking habit, whether any intention to quit smoking, nonsmokers' impression of a smoker, harmful effects of smoking, and other demographic and socioeconomic characteristics.

Frequency

Conducted in 1995.

Availability of data

Survey highlights and tabulations (on request).

Contact

Dr. S.C. Emmanuel
Research and Evaluation Department
Ministry of Health
College of Medicine Building
16 College Road
Singapore 2010

Singapore 0316 FAX: (65) 224 1677

Spain

Survey on Impairments, Disabilities, and Handicaps Title Responsible National Institute of Statistics agency or ministry To estimate the total number of people suffering from any disability, and to know the nature and impairment that originated Objective the disability, and to estimate the number of people suffering from any handicaps. Scope Sample survey of 75,000 households covering about 275,000 persons of the noninstitutionalized population of Spain. **Collection method** Interviewer-administered questionnaires. Impairments; disabilities; handicaps; number, cause, and duration of impairments; type of rehabilitation therapy received; Data content financing source of the rehabilitation therapy; type of rehabilitation center; any source of economic subsidy: and demographic and socioeconomic characteristics. Frequency Conducted in 1986. Data files and statistical tables and publications of survey findings. Availability of data Sr. Jose Quevedo Contact Instituto Nacional de Estadística Area de Estadística Sanitarias Paseo de la Castellana, 183 28046, Madrid, Spain

Phone: (34) (1) 583 92 71

FAX:

(34) (1) 579 27 13

Spain

Title National Health Survey Responsible Ministry of Health and Consumption agency or ministry Summary data about the characteristics and distribution of perceived morbidity, certain habits of life in relation to health. Objective and utilization of the health care services of the noninstitutionalized population of Spain. Sample survey of 40,000 persons of the noninstitutionalilzed population who were 1 year of age and older. Scope Collection method Interviewer-administered questionnaire. Self-perceived health status, incidence of acute illness, prevalence of chronic diseases, limitation of activities for acute and Data content chronic diseases, disorders of the sense organs, consultation with health professionals, hospitalizations, medications, immunizations, tobacco and alcohol consumption, physical exercise, and demographic and socioeconomic characteristics. Frequency Occasionally. Conducted in 1987 and 1993. Availability of Data files and statistical report. data Contact Margarita García/Teresa Escudero Ministerio de Sanidad y Consumo Subdirrección de Informacion y Estadíticas Sanitarias Paseo del Prado 18-20 28014, Madrid, Spain Phone: (34) (1) 583 92 76/383 94 70 FAX: (34) (1) 383 94 88

Sweden

Title

Survey of Living Conditions

Responsible agency or ministry

Statistics Sweden

Objective

To provide national data on living conditions of the population of Sweden 16-84 years of age.

Scope

Random sample of 7,000 persons per year 16–84 years of age, drawn from the Register of the Total Swedish Population.

Collection method

Interviewer-administered questionnaire.

Data content

The survey covers several welfare components with fixed core data—health and consumption of medical services, care and need for assistance, education, housing and residential environment, employment and working conditions, working environment, economic resources, social relations, recreational activities, civic activities, security, transportation and communication, and demographic characteristics. Health component—long-term illnesses and their consequences, functional disorders, outpatient care, state of health and medical care, use of pharmaceutical products, dental condition and dental care. Supplementary component—every second year in an 8-year cycle; one, two, or three main components are expanded.

Frequency

Annual since 1975.

Availability of data

Statistical reports presenting analyses based on the survey findings. Statistical services on commission.

Contact

Joachim Vogel/Uno Davidsson Statistics Sweden V/VÄL S-115 81

Stockholm, Sweden Phone: (46) (8) 783 4000 FAX: (46) (8) 783 4005

Title Health Behavior of School-Age Children in Switzerland

Responsible agency or ministry

Swiss Institute for the Prevention of Alcohol and Other Drug Problems

Objective

To provide national data on health behaviors of school-age children (11–16 years of age). This project is part of an international project sponsored by WHO Europe (Copenhagen).

Scope

Multistage probability sample of the classes by cantons of Switzerland, with oversampling in certain cantons; overall about 16,000 pupils between 11 and 16 years of age were interviewed in 1994.

Collection method

Questionnaire distributed during class.

Data content

Fixed core data component—decided by the international study group on health-relevant behavior, risk factor perception and knowledge, and lifestyle. Supplementary component—varies from survey to survey. Last survey included special questions on AIDS.

Frequency

Every 4 years since 1986.

Availability of data

Reports upon request (the WHO international study group will be consulted). The core questions of all international surveys may be available from the WHO international study group.

Contact

Dr. Yann Le Gauffey Swiss Institute for the Prevention of Alcohol and Other Drug Problems Research Division Case Postale 870 CH 1001 Lausanne, Switzerland

Phone: (41) (21) 320 29 21 FAX: (41) (21) 323 19 30

Swiss Health Promotion Survey Title Responsible Swiss Federal Statistical Office agency or ministry **Objective** To provide information on the most appropriate ways in which to carry out health promotion, disease prevention, treatment, and provision of care and support to the sick and infirm. Also to evaluate the feasibility of conducting a survey that combines a telephone interview with a mail-out questionnaire. Multistage probability sample of 5 cantons of Switzerland. The sample included 2,111 persons aged 20-74 years, with an Scope oversampling of persons 65-74 years of age. Collection method Telephone interview and written questionnaire. **Data content** Health status, chronic conditions, mental health and psychological well-being, dietary habits, physical exercise, knowledge of health and disease, tranquilizer consumption, social interaction, demographic and socioeconomic characteristics. Frequency Conducted in 1989. Statistical reports presenting the survey findings (in French only). Tabulated data upon request. Availability of data Contact Thomas Spuhler, M.D., MSc. Swiss Federal Statistical Office Division of Population and Employment Health Section Schwarztorstr. 53 CH 3003 Berne, Switzerland Phone: (41) (31) 322 87 72 (41) (31) 382 25 92 FAX:

Title Swiss Health Survey (SOMIPOPS) Responsible Institute for Social and Preventive Medicine agency or ministry Objective To gain representative data on health status (perceived morbidity) and use of health services, analyze demand for health care, and develop reliable health and use indicators. Scope Two-stage random sample of Swiss citizens drawn from population registers in the municipalities. Foreign residents were drawn as a single random sample from the national register. Approximately 5,860 persons 20 years and older were interviewed. Collection method Interviewer-administered questionnaire and self-administered questionnaire. Data content Acute and chronic sickness, activities of daily living, doctor and dental consultations, hospital stays, diet, drinking and smoking habits, insurance coverage, demographic and socioeconomic characteristics. Frequency Conducted in 1981-82. Availability of Tabulated data upon request. data Contact Professor F. Gutzwiller, Ph.D. Institute for Social and Preventive Medicine CH 8006 Zurich, Switzerland Phone: (41) (1) 257 66 11

FAX:

(41) (1) 252 54 52

Title

Swiss Health Survey

Responsible agency or ministry

Swiss Federal Statistical Office

Objective

To collect data to research and observe trends of health conditions and their determining factors, handicaps and other consequences of diseases or accidents, and the utilization of the health services, as well as the insurance system for the population of Switzerland. Also to assess the effect of health prevention measures.

Scope

Resident population of 16,000 households of persons 15 years of age and older.

Collection method

Telephone interview and written questionnaire and interviewer-administered questionnaire to persons 75 years of age and over.

Data content

Health-relevant behavior, health habits, risk factor perception and knowledge, chronic illnesses, physical activity, leisure activities, dietary habits, medical consumption, immunizations, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1992. Next survey, 1996.

Availability of data

Statistical reports (from 1992), tabulated data upon request.

Contact

Thomas Spuhler, M.D., MSc. Swiss Federal Statistical Office Division of Population and Employment Health Section Schwarztorstr. 53 CH 3003 Berne, Switzerland

Phone: (41) (31) 322 87 72 FAX: (41) (31) 382 25 92

Title Trend Survey on Health Behavior and Alcohol Consumption in Switzerland

Responsible agency or ministry

Swiss Institute for the Prevention of Alcohol and Other Drug Problems

Objective

To provide national data on health behavior, especially on the consumption of alcohol, tobacco, medication, and illegal drugs of the civilian noninstitutionalized population of Switzerland.

Scope

Multistage probability or quota sample of between 1,500 and 3,000 persons aged 15 years and over, representative for Switzerland, with oversampling of the two smaller language regions.

Collection method

Interviewer-administered questionnaire.

Data content

Fixed core data component—consumption questions and some key health behavior. Supplementary component—varies from survey to survey.

Frequency

Conducted in 1975, 1981, and 1987.

Availability of data

Reports and data files upon request (charges may apply).

Contact

Dr. Gerhard Gmel Swiss Institute for the Prevention of Alcohol and Other Drug Problems Research Division Case Postale 870 CH 1001 Lausanne, Switzerland

Phone: (41) (21) 320 29 21 FAX: (41) (21) 323 19 30

Ukraine

Title National Health Survey Responsible National Institute of Health agency or ministry Ministry of Health of Ukraine To provide national data on the health, illness, and disability status of the civilian peoples in selected regions of Ukraine. Objective Sample included 850,000 persons (adults and children). Scope In-depth comprehensive medical examination. Collection method Incidence of acute illness and accidental injuries, prevalence of chronic diseases and impairments, disability, physician Data content visits, hospital episodes, and demographic characteristics. Annual since 1986. Frequency Availability of Statistical and scientific reports. data Contact Mrs. A. Nagornaya National Institute of Health

18 Chigorina Street Kiev 252042, Ukraine Phone: (7) (44) 294-91-38 FAX: (7) (44) 261-47-73

United Kingdom

Title

General Household Survey

Responsible agency or ministry

Office of Population Censuses and Surveys

Objective

To examine relationships between the main variables with which social policy is concerned, and to monitor changes in these associations over time.

Scope

Sample of approximately 10,000 households covering about 20,000 persons per year. General population resident in private (noninstitutional) households in England, Scotland, and Wales 16 years of age and over, obtained either in person or occasionally by proxy. Health information is obtained for children under 16 years of age from the person responsible for them, usually the mother.

Collection method

Computer-Assisted Personal Interviewing (CAPI).

Data content

Survey covers five main areas—population, housing, employment, education, and health. The fixed core data in the health component include data on health measures (covering the prevalence of chronic and acute problems, utilization of health care services, doctor visits, and hospitalizations), and demographic and socioeconomic characteristics. Supplementary component—varies from year to year but for health has covered dental health, sight and hearing, accidents, smoking, and drinking.

Frequency

Continuous since 1971.

Availability of data

Data tapes and an annual report, unpublished data is also available.

Contact

Published and unpublished data

Ms. Jan Gregory

Office of Population Censuses and Surveys GHS Unit - St. Catherine's House

10 Kingsway - London WC2B 6JP, United Kingdom

Phone: (44) (71) 396 2058 FAX: (44) (71) 405 3020

Data tapes

ESRC Data Archive University of Essex

Wivenhoe Park, Colchester Essex C04 3SQ, United Kingdom

Phone: (44) (206) 87 2570 FAX: (44) (206) 87 2003

Title

National Survey of Family Growth (NSFG)

Responsible agency or ministry

National Center for Health Statistics Centers for Disease Control and Prevention Department of Health and Human Services

Objective

To provide data on factors influencing trends in the birth rate, including contraception and sterilization, infertility, and aspects of maternal and infant health that are most directly related to childbearing.

Scope

Probability sample of households covering women of childbearing age (15-44 years) in the selected sample; 8,450 women were in the 1988 survey and 10,500 women were in the 1995 survey.

Collection method

Interviewer-administered questionnaire.

Data content

Live births and births expected, low birthweight, miscarriages and stillbirths, adoptions, contraception and sterilization, infertility, prenatal care, breastfeeding, teenage sexual activity and pregnancy, unmarried cohabitation, marriage, divorce, and use of family-planning services.

Frequency

Conducted in 1973, 1976, 1982, 1988, and 1995.

Availability of data

Public-use data files and statistical reports presenting survey findings (charges apply).

Contact

William Mosher, Ph.D.
Family Growth Survey Branch
Division of Vital Statistics
National Center for Health Statistics
6525 Belcrest Road, Room 840
Hyattsville, Maryland 20782

Phone: (1) (301) 436-8731, ext. 127

Title National Health and Nutrition Examination Survey (NHANES)

Responsible agency or ministry

National Center for Health Statistics Centers for Disease Control and Prevention Department of Health and Human Services

Objective

To collect data on the prevalence of specific diseases and conditions and to establish normative health-related and nutrition measures for the U.S. population.

Scope

Multistage probability sample of 30,000 persons aged 6 months to 74 years in the civilian noninstitutionalized population.

Collection method

Interviewer-administered questionnaire, physician examination, and laboratory tests.

Data content

Medical history, cognitive and neurological test, blood and urine tests, hearing and vision examination, allergy skin test, spirometry, electrocardiogram (ECG), x rays, ultrasound examinations of the gallbladder, and measurements of bone density.

Frequency

Conducted in 1971-74, 1974-75, 1976-80, and 1988-94.

Availability of data

Public-use data files and statistical reports presenting the survey findings (charges apply).

Contact

Robert S. Murphy
Division of Health Examination Surveys
National Center for Health Statistics
6525 Belcrest Road, Room 900
Hyattsville, Maryland 20782
Phone: (1) (301) 436-7068, ext. 123

Title

National Health and Nutrition Examination Survey I—Epidemiologic Followup Study (NHEFS)

Responsible agency or ministry

National Center for Health Statistics Centers for Disease Control and Prevention Department of Health and Human Services

Objective

To investigate the association between clinical, nutritional, and behavioral factors assessed in the first National Health and Nutrition Examination Survey (NHANES I) and subsequent morbidity, mortality, hospital utilization, changes in risk factors, functional limitation, and institutionalization.

Scope

The NHEFS is a series of followup surveys to all adult persons 25–74 years of age who completed a medical examination at the first NHANES I in 1971–75 (n=14,407). The first followup survey from 1982–84 included all 14,407 persons. The second wave in 1986 was restricted to persons who were 55 years of age and over at the time of the first NHANES I examination (n=3,980). The third wave in 1987 included 11,750 persons and the fourth wave in 1992 included 11,195 persons.

Collection method

The first wave of data collection, traced the cohort; conducted personal interviews with subjects or their proxies; measured pulse rate, weight, and blood pressure of surviving participants; collected hospital and nursing home records of overnight stays; and collected death certificates of decedents. Subsequent waves used a 30-minute computer-assisted telephone interview (CATI) and did not collect physical measurements.

Data content

Medical conditions, hospitalization and institutionalization, functional status, vision and hearing problems, and smoking and drinking habits; physical activity, physical measurements of pulse, blood pressure, and weight (in 1982–84 only), cause of death information for decedents, and demographic and socioeconomic characteristics.

Frequency

Conducted in 1982-84, 1986, 1987, and 1992.

Availability of data

Public-use data files and statistical reports presenting the study findings (charges apply).

Contact

Ms. Christine Cox
Office of Analysis, Epidemiology, and Health Promotion
National Center for Health Statistics
6525 Belcrest Road, Room 730
Hyattsville, Maryland 20782

Phone: (1) (301) 436-5979, ext. 115

Title. Hispanic Health and Nutrition Examination Survey (HHANES)

Responsible agency or ministry

National Center for Health Statistics
Centers for Disease Control and Prevention

Department of Health and Human Services

Objective

To collect data on the prevalence of specific diseases and conditions and to establish normative health-related and nutrition measures for the three major subgroups of the Hispanic population: Mexican Americans, Cuban Americans, and Puerto Ricans.

Scope

Nationwide probability sample of defined population of 16,000 persons, aged 6 months to 74 years. Civilian noninstitutionalized population.

Collection method

Interviewer-administered questionnaire, physician examination, and laboratory tests.

Data content

Medical history, cognitive and neurological test, blood and urine tests, hearing and vision examination, allergy skin test, spirometry, electrocardiogram (ECG), x rays, ultrasound examinations of the gallbladder, and measurements of bone density.

Frequency

Conducted in 1982-84.

Availability of data

Public-use data files and statistical reports presenting the findings (charges apply).

Contact

Robert S. Murphy
Division of Health Examination Surveys
National Center for Health Statistics
6525 Belcrest Road, Room 900
Hyattsville, Maryland 20782

Phone: (1) (301) 436-7068, ext. 123

Title

National Health Interview Survey (NHIS)

Responsible agency or ministry National Center for Health Statistics Centers for Disease Control and Prevention Department of Health and Human Services

Objective

To provide national data on the health, illness, and disability status of the civilian noninstitutionalized population of the United States.

Scope

Multistage probability sample of 50,000 households covering about 135,000 persons per year. Civilian noninstitutionalized population of all persons aged 17 years and over in selected dwellings are interviewed. Adult family member aged 19 years or over may provide data for persons not home and for children under 17 years of age.

Collection method

Interviewer-administered questionnaire.

Data content

Fixed core data component—incidence of acute illness and accidental injuries, prevalence of chronic diseases and impairments, disability, physician visits, hospital episodes, work loss, exercise, and demographic and socioeconomic characteristics. Supplementary component—varies from year to year.

Frequency

Continuous since 1957.

Availability of data

Public-use data files and statistical reports presenting the survey findings (charges apply).

Contact

Owen T. Thornberry, Jr., Ph.D. Division of Health Interview Statistics National Center for Health Statistics 6525 Belcrest Road, Room 850 Hyattsville, Maryland 20782

Phone: (1) (301) 436-7085, ext. 120

Title Longitudinal Study of Aging (LSOA)

Responsible agency or ministry

National Center for Health Statistics Centers for Disease Control and Prevention Department of Health and Human Services

Objective

To measure changes in functional status and living arrangements of older Americans; and to provide mortality rates for demographic, social, economic, and health characteristics that are not available from the vital statistics system.

Scope

Sampling frame developed from persons who were 70 years of age and over when they participated in the 1984 National Health Interview Survey, Supplement on Aging. The sample included 7,527 persons.

Collection method

Computer-assisted telephone interview (CATI) and mail questionnaires.

Data content

Living arrangements and change, physical limitations and change, use of medical care, hospitalizations, social interactions, and demographic and socioeconomic characteristics. Records of survey participants were matched against computerized files of information on hospitalization and death. This information was added to that of the interviews.

Frequency

Conducted in 1984, 1986, 1988, and 1990.

Availability of data

Public-use data files and statistical reports presenting the survey findings (charges apply).

Contact

Ms. Julie A. Weeks
Office of Analysis, Epidemiology, and Health Promotion
National Center for Health Statistics
6525 Belcrest Road, Room 730
Hyattsville, Maryland 20782
Phone: (1) (301) 436-5979, ext. 178



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Topic	Australian Health Survey	National Health Survey	Survey of Disability, Ageing, and Carers	Time Use Survey	National Aboriginal and Torres Strait Islander Survey	National Nutrition Survey
Demographic and socioeconomic characteristics						
Age	X	X	X	X	X	X
Date of birth						
Sex	X	X	X	X	X	X
Race		X			X	X
Ethnicity	The second secon	X		_		X
Nationality or country of birth	X	X X	X	X	X	X
Marital status		X	X	X	X	X
Household composition	X	X	X	X	X	X
Education	X	X	X	` X	X	X
Employment status		X	X	X	X	X
Occupation or industry Environmental work conditions	X	X	X	X		×
Income Military status	X	X	X	×	X	X
Health status						
Chronic conditions	X	X			X	X
Disability			Χ		X	
Handicaps or impairments	X	-	X		Χ	
Limitation of activities		X	X		X	X
Acute conditions	X	X		-		X
Accidents or injuries	X	X				X
Bed-days	- X	X				X
Work or school loss	X	X	X			X
Restricted activity	X	X	X			X
Mental health or well-being	X	X	X			X
Body measurements (height and weight)		X			X	X
Health status (self-assessed)		X			X	x

			AUST	RALIA		
Topic	Australian Health Survey	National Health Survey	Survey of Disability, Ageing, and Carers	Time Use Survey	National Aboriginal and Torres Strait Islander Survey	National Nutrition Survey
Health care utilization						
Hospitalizations	X	X			X	X
Medical consultations	X	X			X	X
Dental consultations	X	Χ				X
Outpatient or clinic visits	X	X			X	X
Physical examinations or checkups	X					
Immunizations	X					
Maternal and child health care	X					
Medicine consumption	X	X				X
Transportation or distance to health care					X	
Lifestyle, risk factors						
Alcohol consumption		X			· X	X
Smoking habits		X			X	X
Drug or narcotic usage	·			•		
Dietary behavior				X	X	X
Health habits		•		+		
Physical activity		X	X	X X		X
Leisure time activity	-			X		
Family planning		X				X
AIDS knowledge, attitudes, and behavior		·	•	, , , , ,	•	
Activities of daily living (ADL)		<i>u</i> .	X	. X	•	
Instrumental activities of daily living			X	X		
Social interaction			X	X		
Environmental living conditions		X			, .	X
Health expenses						
Health expenditures				y waty	· - w · ·	v
Health insurance coverage	X	X		_	•	Χ
Mortality						
Infant mortality	- ma v	•				

		AUST	ΓRIA	
Topic	Special Sport, Home, and Leisure Accident Survey	Special Smoking Habits Survey	Special Health Survey	Special Impairment, Disability, and Handicap Survey
Demographic and socioeconomic characteristics				
Age	X	X	X	×
Date of birth	X	X	X	X
Sex	**************************************	X	X	X
Race				,
Ethnicity		,		
Nationality or country of birth				
Marital status	X	X	. X	X
lousehold composition	X	X	Χ	X
Education	X	X	Χ	X
Employment status	×	X	X	X
Occupation or industry	X	X	X	X
Environmental work conditions		×		
ncome		Anna 1988 - Anna anna 1982, aichean Aillean 1984, aichean aire ann ann ann ann ann ann ann ann ann an	-	
Military status	War and a Marie Marie and Marie Marie And and a second Total and a second Total and a second Total and a second	alasana 1860 anniallassan na 18 no 18 1 1 1800 an 1870		
Health status				
Chronic conditions		X	X	X
Disability			X	X
Handicaps or impairments	entronnes de Maria (anticipat) anticipat M. A. ana a Mantala an anticipatibilità d'Albahaba anno an airdea Alba	and the second s	X	X
imitation of activities				X
Acute conditions		anna ang ang ang ang ang ang ang ang ang ang 	X	
Accidents or injuries	X			
Bed-days		AMERICAN PROPERTY AND ASSESSMENT OF THE PROPERTY OF THE PROPER		
Work or school loss			garante y annota de desta de	
Restricted activity	X		X	
Mental health or well-being	We see come the control to the first of the control to the control	i additional a makaaladdiinaanaanalka oo dha shoonaa dho a soo dha dhoo ah shoolad a shoo bo shooladdiinaanaana	X	
Body measurements (height and weight)			X	
Health status (self-assessed)			X	

		AUST	ΓRIA	
Topic	Special Sport, Home, and Leisure Accident Survey	Special Smoking Habits Survey	Special Health Survey	Special Impairment, Disability, and Handicap Survey
Health care utilization				
Hospitalizations	X	ملاك سيميد المطافعة بالأنداء للاطاط المائدة الاطاط المائدة الاطاط المائدة الاطاط المائدة المائدة المائدة المائدة	X on the batter controller soften an indimensional medical controller and the second soften and the second sof	X
Medical consultations	X		X	X
Dental consultations	, , , , , , , ,	**	X	de ede i de trai de démonstrate de la
Outpatient or clinic visits				X
Physical examinations or checkups	, , , , , , , , , , , , , , , , , , , ,	ع ⊻ (۱۹۹۳-۱۷ میں خو ۱۹۹۳ د خوب او در او اور اور اور اور اور اور اور اور اور	X	Χ
Immunizations			X	
Maternal and child health care				
Medicine consumption			X	
Transportation or distance to health care		* ***	where the sufficiency records for a finishing dealings a finish and the sufficiency records for the sufficiency records for a finishing dealiness are	contributions about the contribution of the co
Lifestyle, risk factors				
Alcohol consumption	· · · · · · · · · · · · · · · · · · ·		A man man make a make the state of the state	en en skriver fram distributed des des en e n en
Smoking habits		×	X	
Drug or narcotic usage	to the state of th	All the state and a control of substantial and control of substantial control of substantial between the control of subst	. All All All on the season of	galanters (Miller) - And Dan Marry). An 1976 - In
Dietary behavior				
Health habits	and the same of the state of the state of the state of the same of the same of the state of the same of the state of the same	enemente – a minima se sommeterne in a mendete state de la manda de la manual de la manual de la manual de la m	A mentile and another and change out it and anti-friend employed and change and in the change is a second and change and it and anti-friend in the change is a second in the change in the change in the change is a second in the change in the change in the change is a second in the change in the c	is provident and an extension of the American States of States
Physical activity			X	X
Leisure time activity				X
Family planning				
AIDS knowledge, attitudes, and behavior				
Activities of daily living (ADL)	a de desimbolocourille a s 350° % a del de section de com a la place construir administrativo	ander error en en assemblassemble e a anderskale en deke skillede enaberror. Fil. 18. sekte en e. e. e.	tima. 20 No	
Instrumental activities of daily living				
Social interaction		and the state of t	and the second section of the s	
Environmental living conditions	ny diapy ar any ara-dahan anjany diapy diapy any any any any any any any any any an	The state of the s	gan - Mar Paragram, av Marie Safficiall des auskalauts i Matalakulla allikurillar	and the second s
Health expenses				
Health expenditures	The second secon			- And the second
Health insurance coverage		to place the statement of the control of the place of the control	annill allan — allan ann a thair should be and ordered referenced any account or the analysis account of the control of the co	idaalliida 194 alla oli 1880oo oo ahka kaa oo o
Mortality				
Infant mortality		THE THE WAY IN THE THE THE STATE OF STA	Andrew a men to the Anth Athense Athense Athense and Anthropological Anthropol	COLUMN AND AND MATERIAL TO A THE COMMUNICATION OF PERSONS AND PERS

					CANADA			
Topic	Canada Health Survey	Canada Fitness Survey	General Social Survey	Canadian Health and Disability Survey	Health Promotion Survey	Health and Activity Limitation Survey	Aboriginal Peoples Survey	National Population Health Survey
Demographic and socioeconomic characteristics								
<u></u>	X	X	Χ	X	X	Χ	X	X
Date of birth	×		X			X	X	×
Sex	X	` ` ` X	X	. X	X	X	X	X
Race	X							
Ethnicity			X				X	X
Nationality or country of birth	X		X				X	X
Marital status	X	X		X	X		X	×
lousehold composition	X		X	X		X		×
ducation	X	X	X	X	X	X	X	×
Employment status	X	X	X	X	X	X	X	×
Occupation or industry	X .	X	X	Χ.	X	X	X	X
Environmental work conditions								
ncome	X	X	X	X man make a second of the sec	raggive was so the terms of the	X	X	×
Military status				and allowed southeast nation is a visit to the second				
Health status								
Chronic conditions	X	P glasgonianiani W no str	X	X		X	X	×
Disability	- X		X	X		X	X	×
landicaps or impairments		X	X	X	X	X	X	
imitation of activities	X	X	X	X	X	X	X	X
Acute conditions	X		X				X	
accidents or injuries	X	broom do a some de		4 975				X
Bed-days	X		X					
Vork or school loss	X		X					
Restricted activity	X X		X	-				X
Mental health or well-being	X X	X	X		X		X	X
Body measurements (height and weight)	` X	X	X		X		X	X
lealth status (self-assessed)	X	Χ	X		X		X	X

					CANADA			
Topic	Canada Health Survey	Canada Fitness Survey	General Social Survey	Canadian Health and Disability Survey	Health Promotion Survey	Health and Activity Limitation Survey	Aboriginal Peoples Survey	National Population Health Survey
Health care utilization								
Hospitalizations	X		X	H name of a nonember	ात । तर पंद्रा का का का कार्याल्य कर पं 1 अवन प्रकार अग्रह क	TO P METS ALL MARGET OF MARKET STREET,	the state of the s	Χ
Medical consultations			X			agas we wasandaha angan sayang	Х	X
Dental consultations	. X.		X	<u></u>	~	aga yar ya qaranga aga ga aya ga aga ga aga aga aga aga	X	X
Outpatient or clinic visits								X
Physical examinations or checkups			X	at a hith A the letter of man and dispersion	erer og mindestat fra V.F. de t	the to the third or contract the third of th	Χ	
Immunizations	X		X					
Maternal and child health care				ur u	a a alberto	The other worker measure someon desidles	6-74 F. 14. MA	-
Medicine consumption	X					X		X
Transportation or distance to health care			· · · · · · · · · · · · · · · · · · ·					X
Lifestyle, risk factors								
Alcohol consumption	X	Χ	Χ	FF AME TWO	X	X	X	X
Smoking habits	X	X	X		X	X	X	X
Drug or narcotic usage		**			X	FA 233 K Salazanaka amatan		in a seminar in early
Dietary behavior		X			X	X	X	
Health habits		•			X	A. A. Mariana semestra mentilagan anggan ang		X
Physical activity	X	X	X		X	X × X × X	X	X
Leisure time activity	X	X	X	- ander streak (ar about solderen bri gere bellendenbilde al ander about	and the second second	X	X	X
Family planning								
AIDS knowledge, attitudes, and behavior				merr in the magnet in the section of	m or in product in the	and the second s	Marketon and Marketon and the contract of the	
Activities of daily living (ADL)			X	X		X	X	X
Instrumental activities of daily living		- Bara PK Wee See	X		· · · · · · · · · · · · · · · · · · ·	X	Property and a series of the Adolesce of the State of the	X
Social interaction			· X		X		X	X
Environmental living conditions	22						X	
Health expenses								*****
Health expenditures	The second of the second of		ستوهورت برهوستان دده که پانتها			X		-
Health insurance coverage							×	
Mortality				u Meru dada udi		Are a se son se se	and the second of the second section of the section of	
Infant mortality		and the second s	. And white the species .	and the second s		on the American control definition of the state of the st		

	CHINA (People's Republic of)	С	ZECH REPUBLIC	C	DE	NMARK
Topic	National Sample Survey on the Situation of Children	Survey of Treated Morbidity	Reproductive Health Survey	Health Interview Survey	The Danish Health and Morbidity Survey	Population Survey on Prevention of Musculoskeletal Disorders
Demographic and socioeconomic characteristics						•
Age	X	X	X	X	×	X
Date of birth	X		Χ		X	
Sex	X	X	X	X	X	X
Race						
Ethnicity			X			
Nationality or country of birth	X	allowances in the final or according to the first or the	Name of the second seco	X	X	
Marital status	X		X	X	X	X
Household composition	X		an angaparana anggapaganagga manay ana. — memmemi — sa sena		_ X	
Education	X		X	X	×	X
Employment status	X X	X	ulars #F assault striffered to a so-	X	X	X
Occupation or industry	X	X		X	X	X
Environmental work conditions	The second second second second is a second	Acceptance of recovery . No p. Acc. serv. And Acc foundation and	englastitutusta o soutonen napananasan englas <mark>t</mark> ener <u>sta</u> sak saki sir seka		X	X
Income			X	X	×	X
Military status		antigation of the state of the	and the second of	-		
Health status						
Chronic conditions	and the second s	X	and the second suppose suppose of the second	X	X	X
Disability		X		X	X	X
Handicaps or impairments	Minister v - months mental disconsistent and also show our Minister months and an animal disconsistent and a second second and a second second and a second	X	particular and another and the second of the	X	X	X
Limitation of activities		X		X	X	X
Acute conditions		X		X	X	X
Accidents or injuries		X			X	X
Bed-days	- Acceptance of the control of the c			X		
Work or school loss		X			X	
Restricted activity		X		X	X	X
Mental health or well-being					X	
Body measurements (height and weight)	X		and the state of t	X	X	
Health status (self-assessed)	×			X	X	X

	CHINA (People's Republic of)	C	ZECH REPUBLIC	;	DE	NMARK
Topic	National Sample Survey on the Situation of Children	Survey of Treated Morbidity	Reproductive Health Survey	Health Interview Survey	The Danish Health and Morbidity Survey	Population Survey on Prevention of Musculoskeletal Disorders
Health care utilization	***************************************					
Hospitalizations	X	X	X	to be in the control of the control	X	X
Medical consultations		X	X		X	X
Dental consultations					Х	
Outpatient or clinic visits	İ		X		X	X
Physical examinations or checkups		-	en kannum - minimaki ki ku yanasimo i	THE THE THE RESIDENCE OF THE PROPERTY AND THE PROPERTY AN	X	
Immunizations						
Maternal and child health care	X		X	THE REPORT OF THE PERSON OF TH	The second secon	AND THE PARTY OF T
Medicine consumption		×			X	X
Transportation or distance to health care	we will be to a some single to the Market St. tool	the second of the second	- storeth state that I was because a with			
Lifestyle, risk factors						
Alcohol consumption		CONTRACTOR OF STREET	X	X	Χ	naggaganinganganga ayugan anu ayan na <mark>ggangahigibing<u>an</u>ungi su su su</mark>
Smoking habits	·		X	X	X	
Drug or narcotic usage	1 V miles 100 h = Obstant t before t = 1 miles and t is in	and the contraction of the same of the same	X	a material bir o describer on distribution	X	Plantestalatin etilikki mempetalimenin milinasiin
Dietary behavior			X	X	X	
Health habits			X	THE RESERVE OF THE PARTY OF THE	Χ	X
Physical activity				X	X	X
Leisure time activity		te gry control to to	11 14 18 7 9 1	X		and the second s
Family planning			X			
AIDS knowledge, attitudes, and behavior			X X	e de major e eje je drama nazvoje	And the second second market shakes on	e verngeriggerie megen see – nee – nee – nee – neegen zijn en – neegen – neede – neegen – nee
Activities of daily living (ADL)					X	
Instrumental activities of daily living	<u> </u>			pre mile to 300° to 4600 States and	******* ** *** *** **	-
Social interaction				X	X	X
Environmental living conditions	X X A MA A MANA A MANAGERY AND A SUMPRI	y come was any our come pour	e e v	X X	X X	
Health expenses						
Health expenditures				Χ	Statement Address on Tree And In the	
Health insurance coverage	U - U W What with the state of	3 St. V. Problem over to SESM. See Milestates a	ر الله الله الله الله الله الله الله الل	X	anga Milakati Matalah Ada di Jahan Matala da Ada di Jahan Matala da Ada di Jahan Matala da Ada di Jahan Matala	Mangah wasan 1750 - 17 an abou e anno san shindhadi e
Mortality						
Infant mortality	X	4 4 We Me	Name and a reliation where the name to the articles.	AND STREET, SALES AND STREET, SALES SALES STREET, SALES SALES SALES STREET, SALES SA	and Allecture an	

	ESTO	NIA	FINLA	ND		FRANCE	
Topic '	Living Conditions Survey	National Health Interview Survey	Population Health Survey	Mini- Finland Health Survey	French Health Survey	National Inpatients Survey	Health Survey Social Protection
Demographic and socioeconomic characteristics							
Age	X	x	×		X	X	X
Date of birth			X		X	X	X
Sex	X	X	X	X	l x	X	X
Race							
Ethnicity					-		
Nationality or country of birth	X				X	X	X
Marital status	X	X	l x		X	X	X
Household composition	X	X	X		X		X
Education	. X	Χ	l x	-	X	X	X
Employment status	Х		l x	X	X	X	X
Occupation or industry	X	X	X X	X	X		
Environmental work conditions	l x			X	l x		X
Income	X X	X	X	X	X X		X
Military status		ua Aka ne v Ma rasa e	X	ه مستعد درد	* ^		
Health status							
Chronic conditions	X	X	X	X	X	X	X
Disability	X	X	. <u>X</u>	X	×	X	X
Handicaps or impairments			X	X	X	X	X
Limitation of activities	X	X	X	X	X	X	X
Acute conditions		* ***			X	X	X
Accidents or injuries		X				X	
Bed-days	X	<u>X</u> .	X		X	X	X
Work or school loss	X X	X	X	X	X	X	
Restricted activity		X	a to - yes specification of state of seconds		X	X	X
Mental health or well-being	X	X		X		X	X
Body measurements (height and weight)			X	X	X		X
Health status (self-assessed)		X		X	X		X

	ESTO	NIA	FINLA	AND		FRANCE	
Topic	Living Conditions Survey	National Health Interview Survey	Population Health Survey	Mini- Finland Health Survey	French Health Survey	National Inpatients Survey	Health Survey Social Protection
Health care utilization							
Hospitalizations		X	X	X	X	X	X
Medical consultations	X	X	Х	X	Х	X	X
Dental consultations	X	X	X		X	· X	X
Outpatient or clinic visits	X	X	X		X	X	X
Physical examinations or checkups		,	X	X	X	X	X
Maternal and child health care					X	X	X
Medicine consumption		X	X	X	×	X	X
Transportation or distance to health care				Χ .	X	X	X
Lifestyle, risk factors							
Alcohol consumption	X	X		X	X	~ X	X
Smoking habits	Î	X	X		X	X	X
Drug or narcotic usage	l \hat{x}					=	
Dietary behavior		X			X	X	X
Health habits		X			* * *	-	
Physical activity	ļ	X		X		X	
Leisure time activity				X		-	-
Family planning		X		X			X
AIDS knowledge, attitudes, and behavior	-	X	-	· · · · · · · · · · · · · · · · · ·	- N - White property residence of the contraction	ggen in terrority of trace	
Activities of daily living (ADL)			×	X			X
Instrumental activities of daily living			l x	X X	SV terodolik oran oran oliku re	en de la communicación de la co	X
Social interaction	X	X					
Environmental living conditions	X	•	-			***	~
Health expenses							
Health expenditures		- *	X * *		X	Χ	X
Health insurance coverage	×	×	×		X	X	X
Mortality							
Infant mortality	*	Ü			g		

	GERMANY	HUNG	GARY	ICELAND]:	SRAEL	ITALY
Topic	Questions on Health— Microcensus Supplementary Survey	Health Interview Survey	Health Behavior Survey	Survey of Living Conditions in Iceland	Use of Health Services Survey	Survey of the Elderly (persons age 60 and over in households)	Survey of Health Conditions of the Population and the Use of Health Services
Demographic and socioeconomic characteristics							
Age	X	X	X	X	X	X	×
Date of birth	X		X	X	×		X
Sex Race	X	Х	X	X	X	X	X
Ethnicity		TO THE STREET STREET	and the second second second second	management of the same	X	×	
Nationality or country of birth	×				l â	x	×
Marital status	X	X	X	X	- ··· x	X	l
Household composition	x	x	^	l â	l â	×	l ŝ
Education	X	$\frac{\hat{x}}{x}$	X		<u>^</u>	X	l \hat{x}
Employment status	x	x	X	x	X	X	l \hat{x}
Occupation or industry	X	X	Antonio della dell	X	- x	×	x
Environmental work conditions		X		X			
Income	X			X		X	X
Military status	The Property of the State of th	anni karan pilatainii karan kali partiya pilatai da ka kali ka ka ka madiin ka k			<u> </u>		
Health status							ļ
Chronic conditions	X	X	X	X	X	The standard of the standard o	X
Disability	X	X		X		X	X
Handicaps or impairments	and the second s	X	X	X		X	X
Limitation of activities		X		X		X	X
Acute conditions	X				X		X
Accidents or injuries	X	X		X	X	of Salara and America	X
Bed-days			X			-	X
Work or school loss	X				X		X
Restricted activity				X		X	X
Mental health or well-being	a distribution of the state of	s. American medicine	one can among the same and the	. Antique de finite communication de la commun	And the second s	en de	
Body measurements (height and weight)		Х	Χ				X
Health status (self-assessed)		Х	Χ			X	X

	GERMANY	HUNG	GARY	ICELAND]:	SRAEL	ITALY
Topic	Questions on Health— Microcensus Supplementary Survey	Health Interview Survey	Health Behavior Survey	Survey of Living Conditions in Iceland	Use of Health Services Survey	Survey of the Elderly (persons age 60 and over in households)	Survey of Health Conditions of the Population and the Use of Health Services
Health care utilization Hospitalizations Medical consultations Dental consultations Outpatient or clinic visits Physical examinations or checkups Immunizations Maternal and child health care Medicine consumption	X X X	X X X	X X X	×	X X X X	X X X X	X X X
Transportation or distance to health care Lifestyle, risk factors Alcohol consumption Smoking habits Drug or narcotic usage Dietary behavior	X.	, X	X X			. X X	X X
Health habits Physical activity Leisure time activity Family planning		X	X	X		X X	×
AIDS knowledge, attitudes, and behavior Activities of daily living (ADL) Instrumental activities of daily living Social interaction Environmental living conditions		X X X		X		X	X
Health expenses Health expenditures Health insurance coverage Mortality Infant mortality	X	and the state of the state of		Controlled to the controlled t	, , X		X

	JAPAN		KOREA (F	Republic of)		LATV	IA
Topic	Comprehensive Survey of Living Conditions of People on Health and Welfare	Patients Survey	National Nutrition Survey	Social Statistics Survey	National Health Interview Survey	Epidemiologic Research on Most Common Noninfectious Diseases	Living Conditions Survey
Demographic and socioeconomic characteristics							
Age	X	X	Χ	X	X	×	X
Date of birth	X					X	X
Sex	X	X	X	X	X	X	X
Race							
Ethnicity		The second of the second of	****	200 Z. A. Z. P.	-	•	
Nationality or country of birth				_		X	X
Marital status	X		X		X	X	X
Household composition	X						X
Education		X	X		X	X	X
Employment status	X	X	X			X	X
Occupation or industry		X	X	E 70 M M 47 47	***************************************	X	X
Environmental work conditions							
Income	X	X		naggiganninghi namay mari — magy <u>nal</u> maryin yi — magab ngazangganay n			
Military status	To all the second description of the second						
Health status							
Chronic conditions	X			X	X	×	
Disability						X	
Handicaps or impairments	A AND A THOUGHT AS A MAN TO A MARKET AND		and the following series of the provider of them the the tell per a	ode serven se ere regimen i i i i i i			X
Limitation of activities	X						X
Acute conditions	X				X		X
Accidents or injuries	X		X	X	-		
Bed-days	X • • • X —	Province of the Control of the Contr	X X	X	and the second		
Work or school loss						X	
Restricted activity	X		THE PERSON NAMED IN COLUMN		X	· ·	
Mental health or well-being	×						
Body measurements (height and weight)	to the sale of the	X	ter ett samme – Geschiebtstellen den der derse bedet engestelle	the Miller Affician Afficial for the Miller of the Section of the		X	
Health status (self-assessed)	X		×		×	x	

	JAPAN		KOREA (R	epublic of)		LATVIA	
Topic	Comprehensive Survey of Living Conditions of People on Health and Welfare	Patients Survey	National Nutrition Survey	Social Statistics Survey	National Health Interview Survey	Epidemiologic Research on Most Common Noninfectious Diseases	Living Conditions Survey
Health care utilization							
Hospitalizations	X	1 10 10 10 10 10 10 10 10 10 10 10 10 10	X	X	X		X
Medical consultations	X X			X X	X	pau v tak s	, , X
Dental consultations	X			X	X		X
Outpatient or clinic visits	X			Χ		.,,	X
Physical examinations or checkups	X						
mmunizations			-		The same was	program or the control of the	
Maternal and child health care		İ					
Medicine consumption					ب سوم در ر		
ransportation or distance to health care					, X		. , X
Lifestyle, risk factors							
Alcohol consumption		, -	X	<i>-</i> •••		X	X
Smoking habits			X			X	X
Orug or narcotic usage			, , ,				X
Dietary behavior		Χ		a av umv	* how an inches	X	
lealth habits	X						
Physical activity	w make we will not the water of the	X	ma u de e	as of shorteness blives and	, , , , , , , , , , , , , , , , , , ,	X	X
eisure time activity			X				
Family planning							
AIDS knowledge, attitudes, and behavior							
Activities of daily living (ADL)	X	×			description of the second of the second of		
nstrumental activities of daily living	į						
Social interaction	ge evapery and 4		9.29 5	W V AVA	was a second of the second	green week made the second	
Environmental living conditions	as the second of		y w		/ /		
Health expenses	man of many to the all the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the stat		·		on a grander of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of		-mg
Health expenditures					X		
Health insurance coverage	X	PRI.		ب سننځمون يا پرې پا	X		n - a ann - i
Mortality			the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	پښتانسان چې د مېښتانسان	a so so see anageria a see assess a see	where the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second	
Infant mortality	The state of motion and specimens, a service in the motion of definitions desired and service as a 20th gr of						

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		NETHERL	ANDS	NEW ZEALAND		NORWAY	<i>!</i>
Topic	Quality of Life Survey	National Health Interview Survey	National Health Interview Survey of Turkish Inhabitants in the Netherlands	Household Health Survey	Health Survey	Survey on Level of Living	Working Environment Survey
Demographic and socioeconomic characteristics							
Age	X	X	X	X	X	X	X
Date of birth	X X	X X			X	- 4	
Sex	X	X	X	. X	X	X	X
Race	l l						
Ethnicity			X	Χ			
Nationality or country of birth	X	X	X		X		
Marital status	X	X	, X X	X	×	X	X
Household composition	, X	<u>X</u>	X	X	×	X	
Education			X	X	X	X	X
Employment status	X	X X	X	X	×	X	X
Occupation or industry		X	X	X	X	X	X
Environmental work conditions	- X					X	X
Income	X	X	X	X	X	X	X
Military status			*				
Health status							
Chronic conditions		X	X	X	X	X	X
Disability	X	. X	X	X	X	X	
Handicaps or impairments	X	X		X	X	X	
Limitation of activities	Ì	X	X	X	X	X	
Acute conditions		X	X	X	×		
Accidents or injuries		- X		X	Χ		X
Bed-days		X	X	X	Χ		
Work or school loss				X			X
Restricted activity	X	X	X	· X	X		
Mental health or well-being	X	X	X	X	Χ	X	X
Body measurements (height and weight)		X	Χ Χ	X	X		
Health status (self-assessed)	×	X	X	X	X		

		NETHERL	ANDS	NEW ZEALAND		NORWAY	′
Торіс	Quality of Life Survey	National Health Interview Survey	National Health Interview Survey of Turkish Inhabitants in the Netherlands	Household Health Survey	Health Survey	Survey on Level of Living	Working Environment Survey
Health care utilization							
Hospitalizations	X	X	X	X	X		
Medical consultations	X	X	Χ	X	X		
Dental consultations		X	X	X	X		
Outpatient or clinic visits	×	X	X	X			
Physical examinations or checkups		X		X	X	agramment Affach supplementer on the tree	
Immunizations		Χ		X			
Maternal and child health care	~ 4	X	X	X	X	. word de r . a	
Medicine consumption	X	X	X	X	×		
Transportation or distance to health care			X	X	A . W		
Lifestyle, risk factors							
Alcohol consumption	×	X	X	X	X	X	
Smoking habits	X	X	X	X	X		
Drug or narcotic usage	Complete Company of the Company of t	And the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s				•
Dietary behavior		X			X		
Health habits			The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon				
Physical activity	X	X		Х	X	X	
Leisure time activity	X	Account to the same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same and a same an	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	historyfeldin Philosophia de publication faille. Specified to you go a characteristica.		X	
Family planning		X	X				
AIDS knowledge, attitudes, and behavior			and an extension of the second section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the				and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s
Activities of daily living (ADL)	X	X			X	Χ	
Instrumental activities of daily living		X		X	X	X	
Social interaction	X				X	X	
Environmental living conditions	X	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	1 labb, da k = 1 i montholorischilde higgspecondische u. sc. ill highlich ett	Modellies -morrowageur valle sustitue-stee very fil. ib. en			
Health expenses							
Health expenditures					X	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	
Health insurance coverage	X	X	X	X		AND THE ARROTTION OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY	
Mortality							
Infant mortality	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	essamunamente en en en en en en en en en en en en en	and the second section of the second section of the second second section of the second second second section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section				

			POLAND			PORTUGAL
Topic	Social Status of Households Survey	Family Health Survey	Sociodemographic and Health Determinants of Infant Mortality Survey	Household Health Expenditures for Health Care Survey	Disabled on the Labor Market Survey	National Health Survey
Demographic and socioeconomic characteristics						
Age	. X	X	X	X	×	×
Date of birth		X	Χ		X	
Sex	X	X	Χ	X	X	X
Race						
Ethnicity						
Nationality or country of birth						
Marital status			X	X	X	X
Household composition	X		X	X	X	X
Education	X	X	X	X	X	×
Employment status	X	X	X	X	X	X
Occupation or industry Environmental work conditions		X	X	V	X	×
Income		-		X X		
Military status				^	•	X
Health status						
Chronic conditions	X	X	X	X		Х
Disability	X	X		X	X	X
Handicaps or impairments		X			X	
Limitation of activities		X			X	X
Acute conditions						X
Accidents or injuries		Χ				
Bed-days						X
Work or school loss						X
Restricted activity					X	X
Mental health or well-being			<u>.</u> -			
Body measurements (height and weight)			X			X
Health status (self-assessed)	X	X	X	X		X

			POLAND			PORTUGAL
Topic	Social Status of Households Survey	Family Health Survey	Sociodemographic and Health Determinants of Infant Mortality Survey	Household Health Expenditures for Health Care Survey	Disabled on the Labor Market Survey	National Health Survey
Health care utilization		• • • • • • • • • • • • • • • • • • • •				
Hospitalizations		Χ	X	Χ ,		X
Medical consultations			X	X		X
Dental consultations						
Outpatient or clinic visits						X
Physical examinations or checkups						
Immunizations	Paradition of the paragraph of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of the confidence of	Samuelan, alfan - aran e Milaka Albania aran ke se	tion of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state	nations are all the second the constitutions and the second the second transcent and transcent a	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	dilimate and an interest of the second
Maternal and child health care						X
Medicine consumption						
Transportation or distance to health care	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon		a many steps of the second second second second second second second second second second second second second			No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10
Lifestyle, risk factors						
Alcohol consumption	Problems States of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of th	management destroyresings	X	no garaganan ke se nggar maggapapa gang pama ke tidak da dalam magang magik tidak Malabaggaga kagi	(4.00 m.)	X
Smoking habits		X	X			X
Drug or narcotic usage	The property of a separate file of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second 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Dietary behavior						X
Health habits	Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual An	Average and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second se	ப்பிராம் இதன் இருந்து இது ஆறிக்கு இருக்கு இதன் இருக்கு இதன் இருக்கு இதன் இருக்கு இதன் கொள்ளும் படி இறைத்தின் இ	and the same of the same and the same and the same and the same and the same and the same and the same and the		
Physical activity	X	X	Χ			X
Leisure time activity						X
Family planning			X			
AIDS knowledge, attitudes, and behavior	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state 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Activities of daily living (ADL)						X
Instrumental activities of daily living						
Social interaction						
Environmental living conditions			X	E. I. S. Sentilation of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second se		
Health expenses						
Health expenditures		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s		Χ		X
Health insurance coverage				X		
Mortality		and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	7			
Infant mortality	A Section and experience of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the sect	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	X	н — на при при при при при при при при при при		

			SINGAPOR	RE		SPAIN	
Topic	National Health Survey	Morbidity Survey of Outpatients	Behavioural Risk Factor Survey	Survey on Cigarette Smoking Among Singaporeans	National Survey of Senior Citizens	Survey on Impairments, Disabilities, and Handicaps	National Health Survey
Demographic and socioeconomic characteristics							
Age		X	X	X		l x	
Date of birth	X		~	^	Χ		
Sex	×	X	X	X	X	X	X
Race	X	X	X	X	X		
Ethnicity Nationality or country of birth	X	X	Χ	X	X		
Marital status	X	e allittación ser as Minimizana, e e como subsemblemo	X	X	X	X	X
Household composition		X	X	X	X	X	X
Education	X		X	X	X	X	X
Employment status	X	territorio de la companio de la comp	X	and the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control	. X	X	X
Occupation or industry	X		X		X	×	X
Environmental work conditions		Angeger (Martin property) - Angeles (Martin property)		Anthonormal dama. In in recent of references on decreasing against not an		×	X
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Restricted activity				ter Statement abundent frem und hande Greif water, and ge Gives, to see from Materians or Materials and water	X.		X
Mental health or well-being					X	X	^
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Health status (self-assessed)			,,		×		

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Topic	National Health Survey	Morbidity Survey of Outpatients	Behavioural Risk Factor Survey	Survey on Cigarette Smoking Among Singaporeans	National Survey of Senior Citizens	Survey on Impairments, Disabilities, and Handicaps	National Health Survey
Health care utilization							
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Alcohol consumption	· · · · · ·	er N&V/ V 1 10 PV 10 A	Y		A KRIM TA WAS MANAGEMENT OF LAND AND	X	X
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Drug or narcotic usage	· ^ ·	w Baser a	y sayan, walk	i i i i i i i i i i i i i i i i i i i	to at the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second to the second	X	
Dietary behavior	×						X
Health habits	· · · · · · · · · · · · · · · · · · ·	ng men was we	e es a ser a	y y was summer a second of gr	n magain in way aga yan magananan an		X
Physical activity	x		X				X
Leisure time activity		A A A A A A A A A A A A A A A A A A A		er - van aanamaan ii ka markamiisintassiisaan			
Family planning							
AIDS knowledge, attitudes, and behavior		V A 4 W TX V	1 T TT NO. T #3500 WE SOM	and the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of th	Be the field that the state of the desired conditions of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of		a servinguranty - time
Activities of daily living (ADL)					X	X	
Instrumental activities of daily living		ac Will or		v da — a v bekar a shift sa si sivraeshiftida	X	X	and the second second
Social interaction					X		
Environmental living conditions			e was e wasterner	with the second second is not seen to be the second			
Health expenses							
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Health insurance coverage	tion of the second of the second of	and the same of the same of the same	X	go ga ayaya an ayaa ay ah ah ah ah ah ah ah ah ah ah ah ah ah	X		An A Milian de Law .
Mortality	1	,					
Infant mortality	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second 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	SWEDEN		SWI	TZERLAND			UKRAINE
Topic	Survey of Living Conditions	Trend Survey on Health Behavior and Alcohol Consumption	Swiss Health Survey (SOMIPOPS)	Health Behavior of School-age Children in Switzerland	Swiss Health Promotion Survey	Swiss Health Survey	National Health Survey
Demographic and socioeconomic characteristics							
Age	X	X	X	X	X	X	×
Date of birth	X	X	X	X	X	X	Ī
Sex Race	Additional and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second	X	X	X	X	X	×
Ethnicity	X						
Nationality or country of birth	$-\frac{x}{x}$	X X	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	X	X	X	×
Marital status		X	X		X	X	
Household composition	X		X	X	X	_ X	
Education	X	X	X	X	X	X	X
Employment status	X	X	X		X	X	X
Occupation or industry	X	X	X	X	X	X	X
Environmental work conditions Income	X X	X	X X	**************************************	XX	- X X	
Military status	area de tido transmisso	X				^	
Health status							
Chronic conditions	X	X	Χ	X	X	X	X
Disability	X		<u>X</u>	ote a standard - de-	Χ	X	×
Handicaps or impairments				X	X	X	X
Limitation of activities	X		X	many	X	X	
Acute conditions	X		X		X	X	X
Accidents or injuries	North V. A. Anthony	X	X	X		X	×
Bed-days		X	X	X	X	X	X
Work or school loss	X		X	X	X	_ X	
Restricted activity	X		X		X	X	
Mental health or well-being		Total total decision of	X	X	X	X	X
Body measurements (height and weight)	X		X	X	X	X	Х
Health status (self-assessed)		X	· X	X	X	X	

	SWEDEN		SWI	TZERLAND			UKRAINE
Topic	Survey of Living Conditions	Trend Survey on Health Behavior and Alcohol Consumption	Swiss Health Survey (SOMIPOPS)	Health Behavior of School-age Children in Switzerland	Swiss Health Promotion Survey	Swiss Health Survey	National Health Survey
Health care utilization							
Hospitalizations	X		X	X	X	X	X
Medical consultations	X	Χ ·	X	X	X	X	X
Dental consultations	X		X	X	, v = 90 date v	X -	
Outpatient or clinic visits	X		X	X			×
Physical examinations or checkups	X	P	X	a 4 1 management of the process	X	, X	X
Immunizations					X		X
Maternal and child health care				,			
Medicine consumption	X	X	X	X	X	X	
Transportation or distance to health care	X		X	to the stage of the stage of			
Lifestyle, risk factors	,				- No. and and a second a second and a second a second and		
Alcohol consumption	. X	Х	X	Χ	Χ	X	
Smoking habits	X		X	Χ	X	X	
Drug or narcotic usage	, ,	X	P II II APP SUBSECTION I	XX	ALTO MEL ANNA MANAGEMENT ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL MANAGEMENT AND ALL ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MANAGEMENT AND ALL MA	X	
Dietary behavior		X		X	X	×	
Health habits	* * * * * * * * * * * * * * * * * * * *	X	w t tem	Χ	X	X	
Physical activity	X	X X		X	Χ		
Leisure time activity	X X	X	X	X	X	X	* · · · · · · · · · · · · · · · · · · ·
Family planning					X	×	
AIDS knowledge, attitudes, and behavior	Ĩ i	*	PA BAN I MAN E MARINE E-TAN	X	X		
Activities of daily living (ADL)	. X		, X	X		X	
Instrumental activities of daily living						X	
Social interaction	X		X		<u>X</u>	X	
Environmental living conditions	X	X	X	o esta successioni.	X	X	
Health expenses							
Health expenditures				X	States in approximation and approximation of the sub-		X
Health insurance coverage	·		X		and the second of the second	X	
Mortality							
Infant mortality	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second 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Demographic and socioeconomic characteristics							
Age	X	Х	X	Χ	Χ	X	X
Date of birth	X	X	X	X	X	<u>X</u> X	X
Sex	X	X	X	X	X	X	X
Race	X	X	·X	X	X	Χ	X
Ethnicity	X	X	Χ	X	X	<u>X</u>	X
Nationality or country of birth	X				X	X	
Marital status	X	X	X	X	X	Notification and on the second	X
Household composition	X	×	X	X		Χ	X
Education	X	X	X	X	X	AND THE CONTRACTOR OF THE PERSON ASSESSMENT ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON ASSESSMENT OF THE PERSON AS	X
Employment status	X	X	X	Χ	X	Χ	X
Occupation or industry	X	X	Х	X	X	X	X
Environmental work conditions							
Income Military status	X	X X	X	X	X	X	X X
Health status							
Chronic conditions	X	X	X	X		X	X
Disability	x	X	X	X		X	X
Handicaps or impairments	X	X	X	Χ	And the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	X	X
Limitation of activities	X	X	X	X		X	X
Acute conditions	X	X	Χ	Χ	all digital production and a state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the st	X	
Accidents or injuries		Х	X				
Bed-days		X	X		The second control of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second seco	Mr. M. Nathanik aura az	
Work or school loss		Х	X				
Restricted activity	X	Χ	X		All Mark Mark States (Salar States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States States St	responsible supportance out on a	
Mental health or well-being		Х	X	Χ			X
Body measurements (height and weight)		X	X	X	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	A soften consolida or more a man a	X
Health status (self-assessed)	X	Х	X	Χ		Χ	X

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Health care utilization							
Hospitalizations	X	X	ett m <u>useum grand i maren magalan</u> n argens säh s <u>autat til sa</u> nn tillagander sorun.	X	X	X	X
Medical consultations	X	Х		X	Χ	X	X
Dental consultations	enterdation (Nutrition Lagoritonium magnetic surveine seekee a demokracy efficiele.	X	X	X	olerane matth and taken all their successive	X	der alle der eine der eine eine seite alle der eine der
Outpatient or clinic visits	X	Х		X	X		
Physical examinations or checkups	**************************************	X		Χ	Χ	Χ	
Immunizations		Х	X	X			
Maternal and child health care		X		and the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of th	X	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	
Medicine consumption			X	X			
Transportation or distance to health care		THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRESS OF THE RESERVE AND ADDRE	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second	A CONTROL OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF	Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas		
Lifestyle, risk factors							
Alcohol consumption	X	Χ	X	to an analysis and a second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of		X	
Smoking habits	X	X	X	X	X	X	
Drug or narcotic usage		1	X	X	mana, pamana, pilinin jamanin app., da 1933. a. shii ayaa ah ayaa dharay ya ma	agammagan coperfideur - Marthaghidhide à Màirth anh-mailth-aide dos, - dréamhlach Ainsc Éoile ann, i-ri	
Dietary behavior		Х	X	X		X	
Health habits		Х				X	
Physical activity		X	X			Χ	X
Leisure time activity		The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon					
Family planning	X			X	X		
AIDS knowledge, attitudes, and behavior		Х		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	Χ		
Activities of daily living (ADL)		X	X	and the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of the comment of th		X	X
Instrumental activities of daily living			X				X
Social interaction		May post Markey, who high superinder popular for more in the markey with a special section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of th	X		any an anatomic statement and an any contraction and	X	X
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