

# International Health Data Reference Guide

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

2001



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Disease Control and Prevention  
National Center for Health Statistics



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## Preface

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This 10th edition of the *International Health Data Reference Guide* provides information collected in 2001 on the availability of selected national vital, hospital, health personnel resources, and population-based health survey statistics. Information for the 42 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.

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# Vital Statistics



## Natality data by country, selected variables, and most recent year available: 2001

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 .....	1995			1997		1997	1997
Australia .....	2000	2000	2000	2000		2000	2000
Austria .....	2000	2000	2000	2000	2000	2000	1998
Belgium .....	2000	2000	---	2000	---	2000	---
Bulgaria, Republic of	1998	1998	1998	1998	1998	1998	---
Canada .....	1999	1999	---	1999	---	1999	1999
Chile .....	1999	1999	---	1999	---	1999	1999
China, People's Republic of	1992	1992	1992	1992	---	1992	1992
Czech Republic .....	2000	2000	2000	2000	2000	2000	2000
Denmark .....	2000	1996	1989	1996	1996	1996	2000
Estonia .....	2000	2000	2000	2000	2000	2000	2000
Finland .....	2000	2000	2000	2000	2000	2000	2000
France .....	1997	1997	1997	---	---	1997	1997
Germany .....	2000	2000	2000	2000	2000	---	2000
Greece .....	1997	1997	1997	1997	---	1997	1997
Hong Kong SAR, China	2000	2000	2000	2000	---	---	2000
Hungary .....	2000	2000	2000	2000	2000	2000	2000
Iceland .....	2000	2000	2000	2000	2000	2000	2000
Ireland .....	2000	2000	2000	2000	---	2000	2000
Israel .....	2000	2000	1998	2000	---	1998	1998
Italy .....	1996	1996	1996	1996	---	1996	1996
Japan .....	1999	2000	2000	2000	2000	2000	2000
Korea, Republic of	1997	1997	<sup>1</sup> 1997	1997	---	<sup>1</sup> 1997	<sup>1</sup> 1997
Latvia .....	2000	2000	2000	<sup>2</sup> 2000	---	---	2000
Lithuania .....	2000	2000	---	2000	---	2000	2000
Luxembourg .....	1998	1998	1998	<sup>3</sup> 2000	<sup>3</sup> 2000	<sup>3</sup> 2000	1998
Netherlands .....	2000	2000	2000	1998-00	1998-00	---	2000
New Zealand .....	2000	2000	2000	2000	---	2000	2000
Norway .....	2000	2000	2000	1998	1998	1998	2000
Poland .....	2000	2000	2000	2000	2000	2000	2000
Portugal .....	2000	2000	2000	2000	---	2000	2000



## Natality data by country, selected variables, and most recent year available: 2001—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
Russian Federation .....	2000	2000		2000	2000	2000	2000
Singapore .....		2000		2000		2000	
Spain .....	1997	1999	1999	1999	---	1999	1999
Sweden .....	2000	2000	2000	2000	2000	2000	2000
Switzerland .....	1999	<sup>4</sup> 1999	<sup>4</sup> 1999	1999	1999	---	1999
Ukraine .....	<sup>1</sup> 1996	<sup>1</sup> 1992	---	<sup>1</sup> 1996	---	<sup>1</sup> 1996	<sup>1</sup> 1996
United Kingdom:							
England .....	1998	1998	1998	1998	---	---	1998
Wales .....	1998	1998	1998	1998	---	---	1998
Northern Ireland .....	2000	2000	2000	---	---	---	2000
Scotland .....	2000	2000	2000	2000	2000	2000	2000
United States .....	2000	2000	---	2000	---	2000	2000

--- Data not available.

<sup>1</sup>Not published, but available upon request.

<sup>2</sup>Data from Health Statistics Department.

<sup>3</sup>Not published.

<sup>4</sup>Legitimate live births only.

## Mortality data by country, selected variables, and most recent year available: 2001—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
Argentina . . . . .	1997		1990–92		1997	1997	1995	
Australia . . . . .	2000	2000	2000		2000	1997	2000	2000
Austria . . . . .	2000	2000	2000	---	2000	<sup>1</sup> 2000	2000	2000
Belgium . . . . .	---	---	---	---	2000	2000	2000	2000
Bulgaria, Republic of . . . . .	1998	1998	1998	1997	---	1998	1998	---
Canada . . . . .	1999	1999	1999	1999	1999	1999	1999	1998
Chile . . . . .	1999	1999	1995–2000	---	1999	1999	1999	1999
China, People's Republic of . . . . .	1998	1998	1998	---	---	---	1998	---
Czech Republic . . . . .	2000	2000	2000	2000	2000	2000	2000	2000
Denmark . . . . .	1998	1998	1999–2000	1999	1994	1994	1994	1994
Estonia . . . . .	1998	1998	1998	1998	1998	1998	1998	1998
Finland . . . . .	1999	2000	2000	2000	2000	1999	2000	2000
France . . . . .	1997	1997	1997	1996	1997	---	1997	---
Germany . . . . .	1998	1998	1998	1998	1998	( <sup>2</sup> )	1998	1998
Greece . . . . .	1999	1999	1998	1999	1999	( <sup>3</sup> )	1997	---
Hong Kong SAR, China . . . . .	1999	1999	1999	---	1999	<sup>1</sup> 1999	1999	---
Hungary . . . . .	2000	2000	2000	2000	2000	2000	2000	2000
Iceland . . . . .	1997	2000	1999–2000	1999	2000	1997	<sup>4</sup> 1998	2000
Ireland . . . . .	2000	2000	1991	---	1998	1998	2000	---
Israel . . . . .	1997	1999	1999	2000	1998	1998	1997	1996
Italy . . . . .	1999	1999	1999	1999	1998	1999	1999	1998
Japan . . . . .	1999	2000	2000	2000	2000	2000	2000	<sup>5</sup> 2000
Korea, Republic of . . . . .	1997	1997	1997	---	---	---	1997	---
Latvia . . . . .	2000	<sup>6</sup> 2000	2000	<sup>7</sup> 2000	2000	2000	2000	2000
Lithuania . . . . .	2000	2000	2000	2000	2000	2000	2000	2000
Luxembourg . . . . .	2000	<sup>8</sup> 2000	1995–97	---	2000	2000	2000	---
Netherlands . . . . .	1999	2000	2000	2000	1999	1999	1999	---
New Zealand . . . . .	1998	2000	1998–00	2000	2000	1997	1998	1998
Norway . . . . .	1999	2001	2001	2000	1999	1999	1999	1999
Poland . . . . .	2000	2000	2000	<sup>9</sup> 2000	2000	2000	2000	2000
Portugal . . . . .	2000	2000	2000	---	2000	2000	2000	---

## Mortality data by country, selected variables, and most recent year available: 2001—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
Russian Federation .....	2000	2000	2000	2000	2000	2000	2000	2000
Singapore .....	2000	2000			2000	2000	2000	
Spain .....	1995	1999	1994–95	---	1999	1995	1996	1999
Sweden .....	1996	1998	1998	1998	1998	1996	1996	1996
Switzerland .....	1999	1999	1999	---	1998	1999	1999	<sup>10</sup> 1999
Ukraine .....	<sup>10</sup> 1996	---	<sup>10</sup> 1996	<sup>10</sup> 1996	---	<sup>10</sup> 1996	<sup>10</sup> 1996	<sup>11</sup> 1996
United Kingdom:								
England .....	2001	2001	2001	2001	2001	2001	2001	2001
Wales .....	2001	2001	2001	2001	2001	2001	2001	2001
Northern Ireland .....	2000	2000	2000	---	2000	2000	2000	---
Scotland .....	2000	2000	2000	2000	2000	2000	2000	2000
United States .....	1999	1999	1999	1995	1999	---	1999	1999

--- Data not available.

<sup>1</sup>Early infant deaths by cause only.

<sup>2</sup>Available for the former German Democratic Republic for 1988.

<sup>3</sup>Data available through 1993 upon request.

<sup>4</sup>Data available for cause, 1995 only.

<sup>5</sup>Infant deaths caused by disease only.

<sup>6</sup>No deaths by marital status.

<sup>7</sup>Data from Health Statistics Department.

<sup>8</sup>Not published.

<sup>9</sup>Only total number of abortions.

<sup>10</sup>Not published, but available upon request.

<sup>11</sup>Data selective.

## Marriage and divorce data by country, selected variables, and most recent year available: 2001

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	1997	1996	<sup>1</sup> 1989	Korea, Republic of	1997	1997	1997
Australia	2000	2000	2000	Latvia	2000	2000	2000
Austria	2000	2000	2000	Lithuania	2000	2000	2000
Belgium	---	---	---	Luxembourg	1998	1998	1998
Bulgaria, Republic of	1998	1998	1998	Netherlands	2000	2000	2000
Canada	1998	1998	1998	New Zealand	1998	1998	1998
Chili	2000	2000	---	Norway	2000	2000	2000
China, People's Republic of	1998	---	1998	Poland	2000	2000	2000
Czech Republic	2000	2000	2000	Portugal	2000	2000	2000
Denmark	2000	2000	2000	Russian Federation	2000	2000	2000
Estonia	2000	2000	2000	Singapore	1998	1998	1998
Finland	2000	2000	2000	Spain	1999	1999	1993
France	1997	1997	1997	Sweden	2000	2000	2000
Germany	2000	2000	2000	Switzerland	2001	2001	2001
Greece	1997	1997	1997	Ukraine	<sup>2</sup> 1996	<sup>2</sup> 1996	<sup>2</sup> 1996
Hong Kong SAR, China	2000	2000	2000	United Kingdom:			
Hungary	2000	2000	2000	England	1997	1997	1997
Iceland	2000	2000	2000	Wales	1997	1997	1997
Ireland	2000	1996	2000	Northern Ireland	2000	2000	2000
Israel	1999	1999	1999	Scotland	2000	2000	2000
Italy	2000	1998	2000	United States	<sup>3</sup> 2000	<sup>4</sup> 1990	<sup>3</sup> 2000
Japan	1999	2000	1999				

--- Data not available.

<sup>1</sup>Legal separation or divorce.

<sup>2</sup>Not published, but available upon request.

<sup>3</sup>Provisional data.

<sup>4</sup>Includes District of Columbia and 47 of the 50 States.

# Hospital Statistics



# Facility statistics by country, selected variables, and most recent year available: 2001—Continued

Country	Hospital coverage	Data tabulated					Most recently published data
		Beds and inpatient utilization	Facilities and services	Outpatient visits	Personnel	Financial data	
Argentina .....	All hospitals	<sup>1</sup> Yes	No	<sup>1</sup> Yes	No	No	1997
Australia .....	Public hospitals	Yes	Yes	Yes	Yes	Yes	1999–2000
	Private hospitals	Yes	Yes	Yes	Yes	Yes	1999–2000
Austria .....	All hospitals	Yes	Yes	No	Yes	<sup>2</sup> Yes	1999
Belgium .....	All hospitals	Yes	Yes	No	No	Yes	1997
Bulgaria, Republic of .....	All hospitals	Yes	No	Yes	Yes	No	1997
Canada .....	All hospitals	Yes	Yes	Yes	Yes	Yes	1997–98
Chile .....	All hospitals	Yes	<sup>1</sup> Yes	<sup>1</sup> Yes	<sup>1</sup> Yes	- - -	1997
China, People's Republic of .....	All hospitals	Yes	Yes	Yes	Yes	Yes	2000
Czech Republic .....	All hospitals	Yes	Yes	Yes	Yes	<sup>3</sup> Yes	2000
Denmark .....	All hospitals	Yes	Yes	Yes	Yes	Yes	1999
Estonia .....	All hospitals	Yes	Yes	Yes	Yes	No	1998
Finland .....	General and psychiatric hospitals	Yes	Yes	Yes	Yes	No	2001
France .....	Public hospitals	Yes	Yes	Yes	Yes	Yes	1995
	Private hospitals	Yes	Yes	No	Yes	Yes	1995
	Mental hospitals	Yes	Yes	Yes	Yes	Yes	1995
Germany .....	All hospitals	Yes	Yes	No	Yes	Yes	2000
Greece .....	All hospitals	Yes	Yes	No	Yes	<sup>4</sup> Yes	1999
Hong Kong SAR, China .....	Public hospitals	Yes	Yes	Yes	Yes	Yes	1998–99
	Private hospitals	Yes	Yes	Yes	No	No	2000
Hungary .....	All hospitals	Yes	<sup>5</sup> Yes	Yes	Yes	<sup>5</sup> Yes	2000
Iceland .....	All hospitals	Yes	No	Yes	Yes	Yes	1994–00
Ireland .....	All public hospitals	Yes	Yes	Yes	Yes	Yes	1999
	All psychiatric hospitals	Yes	Yes	Yes	Yes	Yes	1996
Israel .....	All hospitals	Yes	Yes	<sup>6</sup> Yes	<sup>6</sup> Yes	<sup>7</sup> Yes	1998
Italy .....	All hospitals	Yes	Yes	No	Yes	Yes	1999
Japan .....	All hospitals, general clinics, and dental clinics	Yes	Yes	<sup>8</sup> Yes	<sup>8</sup> Yes	No	2000
Korea, Republic of .....	All hospitals	Yes	Yes	Yes	Yes	No	1997
Latvia .....	All hospitals	Yes	Yes	Yes	Yes	Yes	2000
Lithuania .....	All hospitals	Yes	Yes	Yes	Yes	No	2000
Luxembourg .....	All hospitals	Yes	Yes	No	Yes	Yes	<sup>9</sup> 1999
Netherlands .....	General and specialized hospitals	Yes	Yes	Yes	Yes	Yes	2000
	Psychiatric hospitals <sup>10</sup>	Yes	Yes	No	No	Yes	1999

## Facility statistics by country, selected variables, and most recent year available: 2001—Continued

Country	Hospital coverage	Data tabulated					Most recently published data
		Beds and inpatient utilization	Facilities and services	Outpatient visits	Personnel	Financial data	
New Zealand .....	Public hospitals	Yes	Yes	No	Yes	Yes	1998–99
	Private hospitals	Yes	Yes	No	Yes	Yes	1995
	Psychiatric (inpatients only)	Yes	Yes	No	Yes	Yes	1994
Norway .....	All hospitals	Yes	No	Yes	Yes	Yes	2000
Poland .....	General and mental hospitals	Yes	No	No	No	No	2000
Portugal .....	Public hospitals	Yes	Yes	Yes	Yes	Yes	1995
	Private hospitals	Yes	Yes	Yes	Yes	Yes	1995
Russian Federation .....	All hospitals	Yes	Yes	Yes	Yes	Yes	2000
Singapore .....	Public hospitals	Yes	Yes	Yes	Yes	Yes	2000
	Private hospitals	Yes	Yes	No	No	No	2000
Spain .....	All hospitals	Yes	Yes	Yes	Yes	Yes	1996
Sweden .....	All hospitals	Yes	Yes	Yes	<sup>11</sup> Yes	<sup>11</sup> Yes	2000
Switzerland .....	All hospitals	Yes	Yes	No	Yes	Yes	1999
Ukraine .....	All hospitals	Yes	Yes	Yes	Yes	Yes	<sup>12</sup> 1996
United Kingdom:							
England .....	National Health Service hospitals	Yes	Yes	Yes	Yes	Yes	1995–96
Wales .....	National Health Service hospitals	Yes	Yes	Yes	Yes	Yes	2000–01
	Private hospitals	Yes	No	No	<sup>13</sup> Yes	No	2000
Northern Ireland .....	National Health Service hospitals	Yes	Yes	Yes	Yes	Yes	2000–01
Scotland .....	Scottish Health Service hospitals	Yes	Yes	Yes	Yes	Yes	2001
United States .....	Hospitals with six beds or more	Yes	Yes	Yes	Yes	Yes	2000

--- Data not available

<sup>1</sup>Exclusive to the public sector.

<sup>2</sup>Data available for 50 percent of hospitals.

<sup>3</sup>Not published, but data available on hospitals administered by Ministry of Health.

<sup>4</sup>No national statistics available for individual hospitals.

<sup>5</sup>Data available from the National Health Insurance Fund Administration.

<sup>6</sup>Data available on government hospitals.

<sup>7</sup>On national level, estimates only up to 1996.

<sup>8</sup>Hospitals only.

<sup>9</sup>New series for 1998 and 1999.

<sup>10</sup>From 1997 onward, these statistics cover the entire mental health care, including outpatient mental health care and sheltered housing.

<sup>11</sup>Data not available per individual hospital.

<sup>12</sup>Not published, but available upon request.

<sup>13</sup>Nursing staff only.

## Discharge statistics by country, selected variables, and most recent year available: 2001

Country	Hospital coverage	Data tabulated				Most recently published data
		Age and sex	Length of stay	Diagnosis	Surgical procedures	
Argentina . . . . .	Sub-sector officials	Yes	Yes	Yes	No	1997
Australia . . . . .	Public hospitals	Yes	Yes	Yes	Yes	1999–2000
	Private hospitals	Yes	Yes	Yes	Yes	1999–2000
Austria . . . . .	All hospitals	Yes	Yes	Yes	Yes	1999
Belgium . . . . .	All hospitals	Yes	Yes	Yes	No	1997
Bulgaria, Republic of . . . . .	All hospitals	Yes	Yes	Yes	Yes	1997
Canada . . . . .	General and specialized hospitals, including psychiatric units	Yes	Yes	Yes	Yes	1996–97
	Mental and psychiatric hospitals	Yes	Yes	Yes	No	1995–96
Chile . . . . .	All hospitals	Yes	Yes	Yes	Yes	1996
China, People's Republic of . . . . .	No national statistics					
Czech Republic . . . . .	All hospitals	Yes	Yes	Yes	Yes	2000
Denmark . . . . .	All hospitals	Yes	Yes	Yes	Yes	1999
Estonia . . . . .	All hospitals	Yes	Yes	Yes	Yes	1998
Finland . . . . .	All hospitals	Yes	Yes	Yes	Yes	2001
France . . . . .	Public hospitals (sample survey)	Yes	Yes	Yes	Yes	1993
	Private hospitals	Yes	Yes	Yes	Yes	1993
	Mental hospitals	No	Yes	No	No	1995
Germany . . . . .	All hospitals	Yes	Yes	Yes	<sup>1</sup> No	2000
Greece . . . . .	All hospitals	Yes	Yes	Yes	Yes	1995
Hong Kong SAR, China . . . . .	Public hospitals	Yes	Yes	Yes	<sup>2</sup> Yes	1997
	Private hospitals	No	No	Yes	No	1999
Hungary . . . . .	All hospitals	<sup>3</sup> Yes	Yes	<sup>3</sup> Yes	<sup>3</sup> Yes	2000
Iceland . . . . .	All hospitals	Yes	Yes	Yes	Yes	1998
Ireland . . . . .	Public hospitals (all acute)	Yes	Yes	Yes	Yes	1999
Israel . . . . .	Short-stay hospitals	Yes	Yes	Yes	Yes	<sup>4</sup> 1997
	Long-term hospitals	Yes	Yes	No	No	<sup>4</sup> 1997
	Mental hospitals	Yes	Yes	Yes	Yes	<sup>5</sup> 1997
Italy . . . . .	All hospitals	Yes	Yes	Yes	Yes	2000
Japan . . . . .	Hospitals and general clinics (sample survey)	Yes	Yes	Yes	Yes	1999
Korea, Republic of . . . . .	All hospitals	No	Yes	Yes	Yes	1996
Latvia . . . . .	All hospitals	Yes	Yes	Yes	Yes	2000
Lithuania . . . . .	All hospitals	<sup>6</sup> Yes	Yes	Yes	Yes	1996
Luxembourg . . . . .	All hospitals	No	Yes	<sup>7</sup> Yes	No	1999



## Discharge statistics by country, selected variables, and most recent year available: 2001—Continued

Country	Hospital coverage	Data tabulated				Most recently published data
		Age and sex	Length of stay	Diagnosis	Surgical procedures	
Netherlands.....	General and most specialized hospitals, excluding psychiatric hospitals (98.8 percent of discharges)	Yes	Yes	Yes	Yes	2000
New Zealand .....	Psychiatric hospitals	Yes	Yes	Yes	No	1993
	Public hospitals	Yes	Yes	Yes	Yes	1998–99
	Private hospitals	Yes	Yes	Yes	Yes	1995
	Psychiatric hospitals (inpatients only)	Yes	Yes	Yes	No	1994
Norway .....	General and specialized somatic hospitals	Yes	Yes	Yes	Yes	2000
Poland.....	General (10 percent sample) and mental hospitals	Yes	Yes	Yes	No	1997
Portugal.....	All hospitals	<sup>8</sup> Yes	<sup>9</sup> Yes	No	<sup>9</sup> Yes	1999
Russian Federation .....	All hospitals	No	Yes	Yes	Yes	2000
Singapore .....	All hospitals	Yes	Yes	Yes	Yes	2000
Spain.....	All hospitals	Yes	Yes	Yes	No	1996
Sweden.....	General and specialized hospitals (all discharges)	Yes	Yes	Yes	Yes	2000
Switzerland .....	All hospitals	Yes	Yes	Yes	Yes	<sup>5</sup> 2000
Ukraine .....	All hospitals	No	Yes	Yes	Yes	<sup>5</sup> 1996
United Kingdom:						
England.....	National Health Service hospitals	Yes	Yes	Yes	Yes	1997–98
Wales .....	National Health Service hospitals	Yes	Yes	Yes	Yes	1997–98
Northern Ireland .....	National Health Service hospitals	Yes	Yes	Yes	Yes	1997–98
Scotland .....	Scottish Health Service hospitals (excluding maternity patients and those from psychiatric hospitals and units <sup>10</sup> )	Yes	Yes	Yes	Yes	2001
United States .....	Non-Federal short-stay general and specialized hospitals (sample of discharges), excluding Federal <sup>11</sup> and institutional hospitals, and hospitals with less than six beds	Yes	Yes	Yes	Yes	2000

<sup>1</sup>Only whether or not surgery is completed; no data on form of surgery.

<sup>2</sup>Major acute hospitals only.

<sup>3</sup>Data available from Ministry of Health.

<sup>4</sup>Not published, but available upon request for 751 hospitalizations.

<sup>5</sup>Not published, but available upon request.

<sup>6</sup>Selected age groups.

<sup>7</sup>Broad categories (chapters of ICD–10; 3 digits for most frequent diagnoses).

<sup>8</sup>For sent out patients.

<sup>9</sup>For all patients by speciality.

<sup>10</sup>Psychiatric units from general hospitals are excluded.

<sup>11</sup>Separate statistics are available for these categories of discharges.

# Health Personnel Statistics



## Health personnel statistics by country, type of profession, and most recent year data published: 2001

Country	Data tabulated						Most recently published data
	Physicians	Dentists	Professional nurses	Assistant nurses	Pharmacists	Midwives	
Argentina	Yes	Yes	Yes	Yes	Yes	No	1980
Australia	Yes	<sup>1</sup> Yes	Yes	Yes	Yes	Yes	1998
Austria	Yes	Yes	<sup>2</sup> Yes	<sup>2</sup> Yes	Yes	Yes	1999
Belgium	Yes	Yes	Yes	Yes	Yes	Yes	1995
Bulgaria, Republic of	Yes	Yes	Yes	No	Yes	Yes	1997
Canada	<sup>3</sup> Yes	Yes	<sup>3</sup> Yes	Yes	Yes	No	2000
Chile	Yes	Yes	Yes	Yes	Yes	Yes	1997
China, People's Republic of	Yes	Yes	Yes	Yes	Yes	Yes	2000
Czech Republic	Yes	Yes	Yes	Yes	Yes	Yes	2000
Denmark	Yes	Yes	Yes	Yes	Yes	Yes	1995
Estonia	Yes	Yes	Yes	Yes	Yes	Yes	1998
Finland	Yes	Yes	Yes	Yes	Yes	Yes	2001
France	<sup>4</sup> Yes	Yes	Yes	Yes	Yes	Yes	1997
Germany	Yes	Yes	<sup>3</sup> Yes	<sup>3</sup> Yes	Yes	No	2000
Greece	Yes	Yes	<sup>2</sup> Yes	<sup>2</sup> Yes	<sup>2</sup> Yes	<sup>2</sup> Yes	1998
Hong Kong SAR, China	Yes	Yes	Yes	No	Yes	Yes	2000
Hungary	Yes	Yes	Yes	Yes	Yes	Yes	2000
Iceland	Yes	Yes	Yes	Yes	Yes	Yes	1999–2000
Ireland	Yes	Yes	Yes	Yes	Yes	Yes	<sup>5</sup> 1993
Israel	Yes	Yes	Yes	Yes	Yes	Yes	1998
Italy	<sup>2</sup> Yes	<sup>6</sup> Yes	<sup>2</sup> Yes	<sup>2</sup> Yes	Yes	Yes	1999
Japan	Yes	Yes	<sup>7</sup> Yes	<sup>7</sup> Yes	Yes	<sup>7</sup> Yes	1999
Korea, Republic of	Yes	Yes	Yes	Yes	Yes	Yes	1997
Latvia	Yes	Yes	Yes	No	Yes	Yes	2000
Lithuania	Yes	Yes	Yes	No	Yes	Yes	2000
Luxembourg	Yes	Yes	Yes	Yes	Yes	Yes	2000
Netherlands	Yes	Yes	Yes	No	<sup>8</sup> Yes	Yes	1998
New Zealand	Yes	<sup>9</sup> Yes	Yes	No	No	Yes	2000
Norway	Yes	Yes	Yes	Yes	No	Yes	<sup>10</sup> 2000
Poland	Yes	Yes	Yes	Yes	Yes	Yes	2000
Portugal	Yes	Yes	<sup>11</sup> Yes	No	Yes	No	2000
Russian Federation	Yes	Yes	Yes	Yes	Yes	Yes	2000

## Health personnel statistics by country, type of profession, and most recent year data published: 2001—Continued

Country	Data tabulated						Most recently published data
	Physicians	Dentists	Professional nurses	Assistant nurses	Pharmacists	Midwives	
Singapore	Yes	Yes	Yes	Yes	Yes	Yes	2000
Spain	Yes	Yes	Yes	No	Yes	Yes	1996
Sweden	Yes	Yes	Yes	Yes	Yes	No	2000
Switzerland	Yes	Yes	<sup>12</sup> Yes	<sup>12</sup> Yes	Yes	<sup>12</sup> Yes	2000
Ukraine	Yes	Yes	Yes	Yes	Yes	Yes	1996
United Kingdom:							
England	Yes	Yes	Yes	Yes	Yes	Yes	1998
Wales	Yes	Yes	Yes	Yes	Yes	Yes	2000
Northern Ireland	Yes	Yes	Yes	Yes	Yes	Yes	1998
Scotland	Yes	Yes	Yes	Yes	Yes	Yes	2001
United States	Yes	Yes	Yes	Yes	Yes	Yes	2000

<sup>1</sup>Most recent data for dentists available for 1995.

<sup>2</sup>Only in hospitals.

<sup>3</sup>Most recent data available for 1998.

<sup>4</sup>Most recent data available for 1994.

<sup>5</sup>Published data refer to public sector employees only.

<sup>6</sup>Included in physicians.

<sup>7</sup>Only employed personnel.

<sup>8</sup>Data available include pharmacists working in pharmacies and hospitals, exclude those working in laboratories, industry, and universities.

<sup>9</sup>Published on Web site only.

<sup>10</sup>Includes both economically active and not economically active personnel.

<sup>11</sup>Including all nurses registered in the Guild of Nurses.

<sup>12</sup>Most recently tabulated data available for 1990.

# National Population-Based Surveys



## National population-based surveys, by year and frequency, sample size, and type of survey

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
Australia	Australian Health Survey	1977–78, 1983	18,000 dwellings	Health interview
	Children's Immunization and Health Screening Survey	1983, 1995	30,000 dwellings	Health interview
	National Health Survey	1989–90, 1995	22,000 dwellings (55,000 persons)	Health interview
	Survey of Disability, Aging, and Carers	1988, 1993 (Previously conducted in 1981 as the Survey of Handicapped Persons)	16,000 dwellings (42,000 persons); 600 institutions (6,000 persons)	Disability
	Time Use Survey	1992, 1997	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	13,800 persons	Nutrition
	Survey of Mental Health and Well-being	1997	10,000 persons	Mental health
Austria	Special Sport, Home, and Leisure Accident Survey	1970, 1980, 1989, 1997	29,000 households (67,000 persons)	Multipurpose with health core
	Special Smoking Habits Survey	1972, 1979, 1986, 1997	29,000 households (67,000 persons)	Smoking habits
	Special Health Survey	1973, 1983, 1991, 1999	29,000 households (67,000 persons)	Multipurpose with health core
	Special Impairment, Disability, and Handicap Survey	1976, 1986, 1995	29,000 households (67,000 persons)	Disability
Canada	Canada Health Survey	1978–79	Interview component—12,000 dwellings (40,000 persons 15 years of age and over) Clinical examination component—3,450 dwellings (8,486 persons 2 years of age and over)	Health interview
	Canada Fitness Survey (follow-up—Campbell Survey on Well-being in Canada 1988)	1981	13,500 households (31,000 persons 7–69 years of age)	Fitness
	Canada Health and Disability Surveys	1983–84	65,800 households (15,854 persons)	Disability

## National population-based surveys, by year and frequency, sample size, and type of survey—Continued

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
Canada (Continued)	Participation & Activity Limitation Survey, 2001	Unknown, but planned to follow quinquennial census	Noninstitutionalized adults with disabilities	Disability
	Canadian Tobacco Monitoring Survey (CTUMS)	Ongoing since 1999, two cycles per year	43,000 households (22,000 persons)	Smoking habits
	Canadian Community Health Survey	Biannual beginning 1994–95, 2000–01	131,535 persons	Health interview
	Aboriginal Peoples Survey	1991	20,000 persons	Health interview
	National Population Health Survey	1994–95, 1996–97, 1998–99	17,244 persons	Health interview
	Supplement—Health Promotion	1994–95	13,400 persons 12 years of age and over	Health interview
	Supplement—Asthma	1996–97	2,000 persons	Health interview
China, People's Republic of	National Sample Survey on the Situation of Children	1987, 1992	40,000 households	Multipurpose
	Health Services Household Interview Survey of China	1993, 1998	50,000 households	Health interview
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, 1996 (HIS CR 96)	1993, 1996, 1999	3,400 persons 15 years of age and over	Health interview
Denmark	The Danish Health and Morbidity Survey	1986–87, 1994, 2000	23,000 persons	Health interview and health behavior
	Population Survey on Prevention of Musculoskeletal Disorders	1990–92	6,000 persons 16 years of age and over	Health promotion and behavior
Estonia	Living Conditions Survey	1994, 1999	5,000 persons 18–74 years of age	Level of living
	National Health Interview Survey	1996	5,000 persons 16 years of age and over	Health interview

## National population-based surveys, by year and frequency, sample size, and type of survey—Continued

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
Finland	The Finnish National Health Survey	1964, 1968, 1976, 1987, 1995	6,000 households representing the entire population	Health and security
	Mini-Finland Health Survey	1977–81	8,000 persons 30 years of age and over	Multipurpose
	Finrisk—97 Senior Survey	1997	750 persons 65–74 years of age	Health interview
	The Health 2000 Examination Survey	2000–01	8,028 persons aged 30 or over	Health examination
France	French Health Survey	1960, 1970, 1980, 1991–92	8,000 households (21,000 persons)	Health interview
	National Inpatients Survey	1981, 1991–92	5,000 persons	Health interview
	Health and Social Protection Survey	Annually, between 1988 and 1997; biannual since 1998	20,000 persons since 1998	Health interview
Germany	Questions on Health— Microcensus Supplementary Surveys	Irregular intervals from 1963 to 1986; triennial from 1986 to 1995; every 4 years since 1995	Sampling fraction of households (0.5 percent)	Multipurpose with health core
	National Health Examination and Interview Survey	1997–1999; every 6–8 years	7,124 persons 18–79 years of age	Health interview and examination
Hungary	Health Interview Survey	1984	16,000 households (37,500 persons)	Health interview
	Health Behavior Survey	1994	5,476 persons 15–64 years of age	Health interview
	National Health Interview Survey	2000	7,000 persons 18 years of age and older	Health interview
Iceland	Survey of Living Conditions in Iceland, 1988	1988	2,000 persons 16–75 years of age	Level of living
	Multipurpose Survey (surveys on health promotion)	1994, 1996	1,500 persons 18–75 years of age	Multipurpose
	Health and Living Conditions in Iceland	1998, 1999	1,924 persons 18–75 years of age	Level of living
Ireland	The National Health and Lifestyle Surveys	1998	6,539 adults 18 years of age and over, 8,497 children 9–17 years of age from 187 schools	Level of living



## National population-based surveys, by year and frequency, sample size, and type of survey—Continued

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
Israel	Health Services Survey	1977, 1981, 1993, 1996–1997, 1999–2000	9,000 households (30,000 persons)	Health service usage and health interview, disability
	Survey of the Elderly	1982, 1985, 1997–1998	3,500 households (5,000 persons 60 years of age and over)	Level of living
Italy	Survey of Health Conditions of the Population and the Use of Health Services	1980–83, 1986, 1990–91, 1994, 1999–2000	60,000 households (140,000 persons)	Multipurpose
Japan	Comprehensive Survey of Living Conditions of People on Health and Welfare	Triennial since 1986	280,000 households (780,000 persons)	Multipurpose
Korea, Republic of	Patients Survey	Biannual between 1988 and 1995 Triennial since 1996	4,845 hospitals, clinics, and health centers	Health interview
	National Nutrition Survey	Annual between 1969 and 1997 Triennial since 1998	4,000 households (12,000 persons)	Health and nutrition interview
	Social Statistics Survey	Annual since 1977–1996 (Semiannual only 1997)	30,000 households	Multipurpose
	National Health Interview Survey	Triennial since 1983	6,605 households	Health service usage and health interview
Latvia	Epidemiologic Research on Most Common Noninfectious Diseases	1991	18,040 persons selected (data on 5,449 persons)	Multipurpose
	Living Conditions Survey	1994, 1999	3,500 persons	Living conditions
	Survey of Population about the Health Care System in Latvia	1998, 1999	Of 4,000 permanent inhabitants, 2,759 persons 30–65 years of age	Multipurpose
	Health Behavior Among Latvian Adult Population	1998, 2000	Of 3,000 permanent inhabitants, 2,400 persons 15–64 years of age	Multipurpose

## National population-based surveys, by year and frequency, sample size, and type of survey—Continued

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
Netherlands	Permanent Survey of Living Conditions—This survey incorporates the former surveys:	Continuous since 1997	40,000 persons	Multipurpose
	Quality of Life Survey	Triennial 1974–86 Continuous 1989–1996	3,500 persons 18 years of age and over	Multipurpose
	National Health Interview Survey	Continuous 1981–1996	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	New Zealand Health Survey	1992–93, 1996–97	7,000–8,000 persons	Health interview
	National Nutrition Survey	1996–97	5,000 persons 15 years of age and over	Dietary intake and nutritional status
Norway	Level of Living Multipurpose	1973, 1980, 1983, 1987, 1991, 1995, 2002	5,100 persons 16 years of age and over	Level of living
	Working Environment	1989, 1993, 1996, 2000	4,359 persons 16–66 years of age	Working environment
	Health Conditions	1968, 1975, 1985, 1995, 1998	7,500 persons 16 years of age and over	Health interview
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
	Health Care in Households	1994, 1998, 2000	5,700 households (17,500 persons)	Health expenditures, use of health care services
	Disabled on the Labor Market Survey	1995, 2000	6,700 persons 15 years of age and over	Disability, interview
	Health Interview Survey (POLHIS 96)	1996	19,202 households (47,924 adults and 14,813 children)	Health interview
Portugal	National Health Survey	1987, 1989, 1990, 1991, 1993, 1995–96, 1998–99	22,000 households	Health interview

## National population-based surveys, by year and frequency, sample size, and type of survey—Continued

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
Singapore	National Health Survey	1992, 1998	4,723 persons 18–69 years of age	Health interview and examination
	Survey of Primary Medical Care in Singapore	2001	27,000 patients	Medical consultation
	National Health Surveillance System	2001	6,236 Singapore residents 18 years of age and over	Health interview
	Survey on Cigarette Smoking Among Singaporeans	1983, 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 over	Health interview
Spain	Survey on Disabilities, Impairments, and State of Health	1999	79,000 households (220,000 persons)	Disability
	National Health Survey	1987, 1993, 1997, 2001	26,000 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 over	Health behavior
	Swiss Health Survey (SOMIPOPS)	1981–82	5,860 persons 20 years of age and over	Health interview
	Health Behavior of School-Age Children in Switzerland	1986, 1990, 1994	16,000 children 11–16 years of age	Health behavior
	Swiss Health Promotion Survey	1989	2,111 persons 20–74 years of age	Health interview
	Swiss Health Survey	1992, 1997, 2002	16,000 persons 15 years of age and over	Health interview
Ukraine	National Health Survey	Annual since 1986	850,000 persons	Health examination

## National population-based surveys, by year and frequency, sample size, and type of survey—Continued

Country	Title	Frequency	Sample size <sup>1</sup>	Type of survey
United Kingdom	General Household Survey	Continuous since 1971	8,000 households (15,000 adults)	Multipurpose
	Health Survey for England	Continuous since 1991	11,000 households (20,000 persons)	Health interview, examination, and blood sample measurements
	Scottish Health Survey	Triennial since 1995	7,932 adults 16–64 years of age living in private households (1995). Children aged 2–15 and adults 65–74 included in 1998 survey.	Health interview
United States	National Health Interview Survey (NHIS)	Continuous since 1957	40,000 households (100,000 persons)	Health interview
	National Health and Nutrition Examination Survey (NHANES)	I - 1971–74 IA - 1974–75 II - 1976–80 III - 1988–94 IV - Beginning in 1999, annual sample continuous survey	32,000 persons 7,000 persons 28,000 persons 30,000 persons 5,000 persons annually	Health interview and examination
	National 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	10,847 women 15–44 years of age	In-person interview
	National Health and Nutrition Examination Survey I—Epidemiologic Follow-up Study (NHEFS)	1982–84, 1986, 1987, 1992	Periodic follow-up to 14,407 adults in NHANES I	Health interview
	Longitudinal Studies of Aging (LSOA)			
	LSOA I	1984, 1986, 1988, 1990	7,527 persons 70 years of age and over in the 1984 NHIS	Health interview
	LSOA II	1994–95, 1997–1998, 1999–2000	9,447 persons 70 years of age and over in the 1994 NHIS	Health interview

<sup>1</sup>Sample size shown is for the latest survey conducted unless otherwise stated.

# Profile of National Populations-Based Surveys



## Australia

<b>Title</b>	Australian Health Survey
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide information about the health of Australians and their use and need of various health services and facilities.
<b>Scope</b>	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 over were interviewed (mother was usual respondent for children less than 15 years of age).
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Health-related actions, acute illness conditions, hospitalizations, reduced activity, consultations with health professionals, medications taken, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1977–78 and 1983 (replaced by National Health Survey Series).
<b>Availability of data</b>	Sample data file and statistical reports of survey findings (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Australia

<b>Title</b>	Children's Immunization and Health Screening Survey
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide information on 1) immunization coverage of children 6 years of age or under against vaccine preventable diseases, and 2) health screening practices: dental consultations, sight and hearing checks, visits to baby health clinics.
<b>Scope</b>	The survey was conducted as part of the regular ABS monthly population survey on a national sample of approximately 30,000 private dwellings, covering about one-half of 1 percent of the population. Only dwellings that had children 15 years of age or under were included in the survey. Where possible, information was obtained from the child's mother or female guardian.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Immunization status (full, partial, not immunized) against individual conditions covered in the Children's Immunization Schedule, and against the conditions in total. Other vaccinations (not on Schedule), visits to baby health clinics, sight and hearing tests, dental consultations, childcare, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted irregularly; 1983 and 1995. Topic also included in the 1989–90 National Health Survey.
<b>Availability of data</b>	Statistical reports of survey findings (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Australia

<b>Title</b>	National Health Survey
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide baseline and trend data on a broad range of health status indicators and health-related behaviors of Australians.
<b>Scope</b>	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 15–17 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.
<b>Collection method</b>	Interviewer-administered questionnaire and self-administered questionnaires for some topics.
<b>Data content</b>	Recent illness, long-term illness, general health and well-being, specific women's health issues, hospital episodes, medical 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.
<b>Frequency</b>	Conducted in 1989–90 and 1995. Planned every 5 years.
<b>Availability of data</b>	Public-use data files and statistical reports on survey findings (charges apply).  Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au



## Australia

<b>Title</b>	Survey of Disability, Aging, and Carers
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide national data on persons with one or more long-term health conditions and on older persons living in households and health establishments.
<b>Scope</b>	Multistage sample of 42,000 persons in 16,000 residential dwellings and 6,000 patients or residents from approximately 600 randomly selected establishments. All persons in selected dwellings aged 18 years and over are interviewed.
<b>Collection method</b>	Household component—interviewer administered questionnaire. Persons identified as having one or more long-term health conditions, aged 60 years or over, 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.
<b>Data content</b>	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.
<b>Frequency</b>	Previously irregular. Similar surveys conducted in 1981 and 1988. Beginning in 1993, conducted at 5-year intervals.
<b>Availability of data</b>	Statistical reports of survey findings, public-use files, special-purpose tabulations, and statistical analysis will be available (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Australia

<b>Title</b>	Time Use Survey
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide national data on the patterns of time use of persons 15 years of age and over, living in households.
<b>Scope</b>	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.
<b>Collection method</b>	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.
<b>Data content</b>	Identification of persons with disability and with severe handicap, identification of principal care givers for the latter, type of activity, start and finish time of activity episode for whom activity was done, location of activity episode, mode of travel, social context of activity episode, simultaneous activities, and demographic and socioeconomic characteristics. Also collected is information about the purchase of time-saving services and the presence of items in the household which impact on the way that people spend their time.
<b>Frequency</b>	Pilot survey conducted in 1987. Full survey conducted in 1992; planned for 5-year intervals.
<b>Availability of data</b>	Statistical reports of survey findings, public-use files and special tabulations are available (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Australia

<b>Title</b>	National Aboriginal and Torres Strait Islander Survey
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide comparable information across Australia about Aboriginal and Torres Strait Islander people.
<b>Scope</b>	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.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Family and culture, housing, education and training, employment and income, law and justice, and health data including health actions, attitudes to health, health status, illness conditions, health-risk factors, disability, and access and attitudes to health services and facilities.
<b>Frequency</b>	Irregular. First conducted in 1994.
<b>Availability of data</b>	Standard publications and consultancy service (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Australia

<b>Title</b>	National Nutrition Survey
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide baseline data on food and nutrient intakes of Australians and their physical measurements.
<b>Scope</b>	Sample of approximately 13,800 persons 2 years of age and over, selected from respondents to the National Health Survey. Two or three persons per household were selected.
<b>Collection method</b>	Qualified nutritionists were employed as interviewers. Interviewer-administered individual Food Intake Questionnaire for all persons 2 years of age and over. Signed consent was requested for physical measurements including height, weight, waist and hip circumference. Blood pressure readings were taken of persons 16 years of age and over. Consent was given by parent or guardians for children under 18 years of age living at home. Mail-back Food Frequency Questionnaire was provided for selected persons 12 years of age and over.
<b>Data content</b>	Detailed food intake during previous 24 hours, physical measurements (blood pressure, height, weight, waist, and hip), dietary habits and attitudes, and average frequency of intake of foods over previous 12 months.
<b>Frequency</b>	Conducted in 1995; no proposal for next survey.
<b>Availability of data</b>	Demographic and health data available in public-use tapes and statistical reports of survey findings (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Australia

<b>Title</b>	Survey of Mental Health and Well-being
<b>Responsible agency or ministry</b>	Australian Bureau of Statistics
<b>Objective</b>	To provide information on how many Australians have specific mental disorders, what disablement is associated with these disorders, and what use is made of health and human services.
<b>Scope</b>	Sample of approximately 10,000 persons 18 years of age and over from private dwellings and selected special dwellings. One person per household was selected.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Disability, specific mental disorders, health service utilization and perceived health need, and general health status.
<b>Frequency</b>	Conducted in 1997.
<b>Availability of data</b>	Demographic and mental health and well-being data will be available in public-use tapes and a statistical report (charges apply).
<b>Contact</b>	Ron Casey Director, Population & Social Statistics Australian Bureau of Statistics GPO Box 9817 Brisbane, Queensland 4001 Australia FAX: (61) (6) 253 1404 E-mail: ron.casey@abs.gov.au

## Austria

<b>Title</b>	Special Sport, Home, and Leisure Accident Survey
<b>Responsible agency or ministry</b>	Statistics AUSTRIA
<b>Objective</b>	To provide national data on the sport, home, and leisure accidents of the civilian noninstitutionalized population of Austria.
<b>Scope</b>	Sample of about 29,000 households covering about 67,000 persons per microcensus program. Generally, all persons in selected dwellings are interviewed. Adult family member may provide data for persons not at home and for children.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Incidence of accidents by causes and places, kind and severity of injuries, primary medical providings and health consequences, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Planned every 10 years. Conducted in 1970, 1980, 1989, and 1997.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Mag. Jeannette Klimont Statistics AUSTRIA DIRECTORATE Population Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262 FAX: (43) (1) 711 28 8139 E-mail: jeannette.klimont@statistik.gv.at

## Austria

<b>Title</b>	Special Smoking Habits Survey
<b>Responsible agency or ministry</b>	Statistics AUSTRIA
<b>Objective</b>	To provide national data on smoking habits of the civilian noninstitutionalized population of Austria.
<b>Scope</b>	Sample of about 29,000 households covering about 67,000 persons per microcensus program. All persons aged 16 years or over in selected dwellings are interviewed. Adult family member may provide data for persons not at home.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Prevalence of smokers, ex-smokers, and true nonsmokers; type and amount of tobacco consumption; health and withdrawal consequences of smoking; and demographic and socioeconomic characteristics.
<b>Frequency</b>	Planned every 7 years. Conducted in 1972, 1979, 1986, and 1997.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Mag. Jeannette Klimont Statistics AUSTRIA DIRECTORATE Population Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262 FAX: (43) (1) 711 28 8139 E-mail: jeannette.klimont@statistik.gv.at

## Austria

<b>Title</b>	Special Health Survey
<b>Responsible agency or ministry</b>	Statistics AUSTRIA
<b>Objective</b>	To provide national data on the health status of the civilian noninstitutionalized population of Austria.
<b>Scope</b>	Sample of about 29,000 households covering about 67,000 persons per microcensus program. Generally, all persons living in the selected dwellings are interviewed. Adult family member may provide data for persons not at home and for children.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Incidence of acute illness and prevalence of selected chronic diseases and complaints, medications used, physician visits and hospital episodes, participation in health prevention and vaccination programs, health behavior, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Planned every 10 years. Conducted in 1973, 1983, 1991, and 1999.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Mag. Jeannette Klimont Statistics AUSTRIA DIRECTORATE Population Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262 FAX: (43) (1) 711 28 8139 E-mail: jeannette.klimont@statistik.gv.at



## Austria

<b>Title</b>	Special Impairment, Disability, and Handicap Survey
<b>Responsible agency or ministry</b>	Statistics AUSTRIA
<b>Objective</b>	To provide national data on the impairment, disability, and handicap status of the civilian noninstitutionalized population of Austria.
<b>Scope</b>	Sample of about 29,000 households covering about 67,000 persons per microcensus program. Generally, all persons in selected dwellings are interviewed. Adult family member may provide data for persons not at home and for children.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Prevalence of impairments, disabilities, and handicaps; cause, severity, and duration of disabilities; care, remedies, and rehabilitation facilities for disabled people; and demographic and socioeconomic characteristics.
<b>Frequency</b>	Planned every 10 years. Conducted in 1976, 1986, and 1995.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Mag. Jeannette Klimont Statistics AUSTRIA DIRECTORATE Population Statistics Hintere Zollamtsstrasse 2b A-1033 Vienna, Austria Phone: (43) (1) 711 28 7262 FAX: (43) (1) 711 28 8139 E-mail: jeannette.klimont@statistik.gv.at

## Canada

<b>Title</b>	Canada Health Survey
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	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.
<b>Scope</b>	Noninstitutionalized population of persons 15 years of age and over, excluding residents of the Northwest Territories, 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.
<b>Collection method</b>	Interviewer-administered questionnaire, self-administered questionnaire, and physical measurement.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1978–79.
<b>Availability of data</b>	Data tapes and statistical reports.
<b>Contact</b>	Statistics Canada Special Surveys Division Client Services and Dissemination Phone: 1–888–297–7355 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>

## Canada

<b>Title</b>	Canada Fitness Survey
<b>Responsible agency or ministry</b>	Canadian Fitness and Lifestyle Research Institute
<b>Objective</b>	To provide data on physical activity patterns and lifestyle habits of Canadians, as well as the values, motives, and obstacles affecting physical activity.
<b>Scope</b>	Sample of approximately 13,500 households with 31,000 persons 7–69 years of age.
<b>Collection method</b>	Self-administered questionnaire and clinical examination of physical measurements.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1981.
<b>Availability of data</b>	Data tapes and statistical reports.
<b>Contact</b>	Canadian Fitness and Lifestyle Research Institute 185 Somerset Street–West, Suite 201 Ottawa, K2P 0J2 Canada Phone: (613) 233–5528 FAX: (613) 233–5536

## Canada

<b>Title</b>	Canadian Health and Disability Survey
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	To gather data on the prevalence of disability according to the functional definitions of disability and handicap accepted by the World Health Organization.
<b>Scope</b>	As a supplement to the Labour Force Survey (LFS), a sample of disabled persons 15 years of age and over 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.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1983–84.
<b>Availability of data</b>	Data tapes and statistical reports (charges apply).
<b>Contact</b>	Statistics Canada Client Services and Dissemination Phone: 1–888–297–7355 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>

## Canada

<b>Title</b>	Participation and Activity Limitation Survey, 2001
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	Create a national database on persons with disabilities (defined as an activity limitation or participation restriction associated with long-term health, physical or mental conditions) to support social policy development and health-related research.
<b>Scope</b>	Noninstitutionalized adults (15 years old and above) and children (under 15 years of age) living in all provinces; northern territories and Indian reserves are excluded. The population is identified through the Census of Population long form.
<b>Collection method</b>	Mostly telephone interviewers; in situations where the activity limitation precludes this method, personal interviews are conducted. Proxy interviews are permitted as a last resort to obtain information.
<b>Data content</b>	Nature and severity of disability; needs and unmet needs for disability supports (personal and technical); impacts on everyday activities, education, employment, social participation; sociodemographic information collected by the census is added to the data file to supplement the survey data.
<b>Frequency</b>	Unknown, but planned as a survey to follow the quinquennial census.
<b>Availability of data</b>	Public-use microdata files, internet tables, statistical reports, and custom tabulations.
<b>Contact</b>	Statistics Canada Housing, Family and Social Statistics Division Client Services and Dissemination Phone: (613) 951-5979 FAX: (613) 951-0387 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>

## Canada

<b>Title</b>	Canadian Tobacco Monitoring Survey (CTUMS)
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	Gather data on smoking behavior and opinions about smoking.
<b>Scope</b>	Noninstitutionalized population aged 15 and over, excluding Indian reserves and the population residing in the Yukon, Nunavut, and Northwest Territories. Random digit-dialing telephone sample. Data collected from about 43,000 households and interviews with approximately 22,000 persons per year.
<b>Collection method</b>	Telephone interviews.
<b>Data content</b>	Household level: household size, age of household members, household income range, smoking at home, smoking restrictions. Person level: sociodemographic characteristics, current smoking behavior, cigarette quitting experiences, sources of cigarettes, opinions about health effects of smoking.
<b>Frequency</b>	Ongoing since 1999, two cycles per year (half-year data each; can be combined for full-year data).
<b>Availability of data</b>	Public use microdata file (charges apply). Fact sheets on Health Canada Web site (free of charge).
<b>Contact</b>	Statistics Canada Special Surveys Division Client Services and Dissemination Phone: (613) 951-7355 or (888) 297-7355 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>

## Canada

<b>Title</b>	Canadian Community Health Survey
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	The CCHS has two major objectives: 1) Provide timely and reliable cross-sectional estimates of population health for subprovincial levels of geography, and 2) Provide in-depth data for topics identified as key data gaps in the understanding of issues relating to population health.
<b>Scope</b>	Noninstitutionalized population aged 12 and over, excluding Indian reserves, armed forces personnel, persons living on crown lands and some remote regions. Cycle 1.1 has a total sample of 130,000 respondents with approximately 85 percent drawn from the Labour Force Survey Frame and 15 percent through Random-Digit Dialing (RDD).
<b>Collection method</b>	Computer Assisted Personal Interviews for respondents selected through the Labour Force Survey Area Frame and Computer Assisted Telephone Interviews for the RDD frame.
<b>Data content</b>	Health status, health determinants, and health system utilization.
<b>Frequency</b>	Two-year cycle: first year 130,000 subregional survey; second year 30,000 focus content survey. Repeats every 2 years. Every 2 years beginning 1994–95.
<b>Availability of data</b>	Tabular statistics via internet, custom tabulations (May 8, 2002), master file access through Statistics Canada Research Data Centers, public use microdata file. Public use of microdata files, statistical reports (charges apply).
<b>Contact</b>	Mario Bédard Phone: (613) 951–8933 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>

## Canada

<b>Title</b>	Aboriginal Peoples Survey
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	To provide a comprehensive data source about Canada's Aboriginal Peoples, to enable an assessment of their socioeconomic conditions, and to provide information required to develop programs and services for Aboriginal Peoples in Canada.
<b>Scope</b>	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 <i>identify</i> 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).
<b>Collection method</b>	Interviewer-administered adult questionnaire and children questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1991.
<b>Availability of data</b>	Microdata file, statistical reports, and custom tabulations.
<b>Contact</b>	Statistics Canada Housing, Family and Social Statistics Division Client Services and Dissemination Phone: 1-888-297-7355 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>



## Canada

<b>Title</b>	National Population Health Survey
<b>Responsible agency or ministry</b>	Statistics Canada
<b>Objective</b>	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.
<b>Scope</b>	Noninstitutionalized population, 10 provinces and 2 territories (all ages), excluding natives on reserves. Exclusions account for approximately 3 percent of total population. Approximately 22,000 households were sampled. One person in each household was randomly selected to participate in the longitudinal portion of the survey.
<b>Collection method</b>	Computer-assisted personal interview.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1994–95, 1996–97, 1998–1999, and 2000–01.
<b>Availability of data</b>	Microdata file and statistical reports.
<b>Contact</b>	Statistics Canada Special Surveys Division Client Services and Dissemination Phone: 1–888–297–7353 Web site: <a href="http://www.statcan.ca/health_surveys">www.statcan.ca/health_surveys</a>

## China, People's Republic of

<b>Title</b>	National Sample Survey on the Situation of Children
<b>Responsible agency or ministry</b>	State Statistical Bureau Organization of Rural Social and Economic Surveys Organization of Urban Social and Economic Surveys
<b>Objective</b>	To provide information about the health and living conditions of children in China.
<b>Scope</b>	Stratified two-stage cluster sample of approximately 40,000 households in 30 provinces, autonomous regions, and cities.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Health conditions, disabilities, health care, hospitalizations, environmental living conditions, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1987 and 1992.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Jianwu Wen International Statistical Information Center State Statistical Bureau 38 Yuetan Nanjie Sanlihe Beijing People's Republic of China Phone: (86) (10) 6326-6600 FAX: (86) (10) 6340-1410

## China, People's Republic of

<b>Title</b>	Health Services Household Interview Survey of China
<b>Responsible agency or ministry</b>	Center for Health Statistics Information, Ministry of Health
<b>Objective</b>	To collect information about health needs and utilization of health services by Chinese residents.
<b>Scope</b>	Multistage stratified cluster sample of more than 50,000 households in 30 provinces, autonomous regions, and municipalities.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Living condition and income of household, health conditions, disabilities, health care, clinic visit, hospitalization, health insurance, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1993 and 1998.
<b>Availability of data</b>	Published book and database.
<b>Contact</b>	Mr. Jun Gao Center for Health Statistics Information Ministry of Health 1 Nanlu Xizhimenwai 100044 Beijing People's Republic of China Phone: (86) (10) 6879-2487 FAX: (86) (10) 6879-2478 E-mail: jxg0@chsi.moh.gov.cn

## Czech Republic

<b>Title</b>	Survey of Treated Morbidity
<b>Responsible agency or ministry</b>	Institute of Health Information and Statistics
<b>Objective</b>	To determine the distribution of incidence of chronic diseases, congenital anomalies, permanent sequelae of diseases and injuries, and incidence of acute diseases and injuries.
<b>Scope</b>	Sample (born on seventh day of an odd month) yielded 131,097 inhabitants (1.64 percent of the total population of the Czech Republic).
<b>Collection method</b>	Questionnaire filled in by all general practitioners.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1986.
<b>Availability of data</b>	Published statistical reports presenting the survey findings in Czech only (translation, charges apply).
<b>Contact</b>	Vlasta Mazánková Institute of Health Information and Statistics of the Czech Republic Palackého nám. 4 -P.O. Box 60 12800 Praha 2, Czech Republic Phone: (420) (2) 2497 2243 FAX: (420) (2) 2491 5982 E-mail: mazankova@uzis.cz

## Czech Republic

<b>Title</b>	Reproductive Health Survey
<b>Responsible agency or ministry</b>	Czech Statistical Office Ministry of Health
<b>Objective</b>	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.
<b>Scope</b>	Of the 12,747 households selected, 4,870 were found to include at least 1 woman of reproductive age. Of this number, approximately 4,497 were successfully interviewed.
<b>Collection method</b>	Female interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1993.
<b>Availability of data</b>	Final report published 1995.
<b>Contact</b>	Czech Statistical Office Sokolovská 142 18604 Praha 8-Karlin, Czech Republic Phone: (420) (2) 7405 2270 FAX: (420) (2) 6631 0429

## Czech Republic

<b>Title</b>	Health Interview Survey, Czech Republic, 1999 (HIS CR 99)
<b>Responsible agency or ministry</b>	Institute of Health Information and Statistics of the Czech Republic
<b>Objective</b>	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.
<b>Scope</b>	Multistage random stratified sample of 3,400 persons 15 years of age and over from the Central Register of Inhabitants of the Czech Republic.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1993, 1996, and 1999.
<b>Availability of data</b>	HIS CR 93, HIS CR 96, HIS CR 99 (Czech or English data version).
<b>Contact</b>	Vlasta Mazánková Institute of Health Information and Statistics of the Czech Republic Palackého nám. 4 -P.O. Box 60 12800 Praha 2, Czech Republic Phone: (420) (2) 2497 2243 FAX: (420) (2) 2491 5982 E-mail: mazankova@uzis.cz

## Denmark

<b>Title</b>	The Danish Health and Morbidity Survey
<b>Responsible agency or ministry</b>	Danish Institute for Clinical Epidemiology Center for Studies in Health and Health Services
<b>Objective</b>	To provide national data on the health, illness, illness behavior, and health behavior of the adult population of Denmark.
<b>Scope</b>	Simple probability sample of 6,000 persons every 6 years. The sample is drawn from all of the population 16 years of age and over from the central population register. In 2000 the sample has been enlarged with extra county samples and re-interview of the 1994 sample. Approximately 23,000 persons in the 2000 sample.
<b>Collection method</b>	Interviewer-administered questionnaire supplemented with self-administered questionnaire.
<b>Data content</b>	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 particular general topics. Each survey also includes additional specific topics.
<b>Frequency</b>	Every 6 years. Conducted in 1986–87, 1994, and 2000.
<b>Availability of data</b>	Statistical reports and data files according to specific agreement.
<b>Contact</b>	Niels Kr. Rasmussen and Mette Kjøller National Institute of Public Health 25, Svanemøllevej 2100 Copenhagen Ø, Denmark Phone: (45) (39) 20 77 77 FAX: (45) (39) 20 80 10 E-mail: mk@niph.dk Web site: <a href="http://www.niph.dk">www.niph.dk</a>

## Denmark

<b>Title</b>	Population Survey on Prevention of Musculoskeletal Disorders
<b>Responsible agency or ministry</b>	Danish Institute for Clinical Epidemiology Center for Studies in Health and Health Services
<b>Objective</b>	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 muscles and skeletal system.
<b>Scope</b>	Simple probability sample of 6,000 persons 16 years of age and over. The sample is drawn from the central population register.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Health promotion behavior regarding low-back pain (knowledge and handling of risk factors, actual behavior, and attitude toward 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.
<b>Frequency</b>	Conducted in 1990–92. The survey forms part of the Danish Institute for Clinical Epidemiology's regular health and morbidity survey program, alternately as general health and morbidity surveys, and as health surveys on specific topics.
<b>Availability of data</b>	Statistical reports in Danish and data files according to specific agreement.
<b>Contact</b>	Mette Kjøller National Institute of Public Health 25, Svanemøllevej 2100 Copenhagen Ø, Denmark Phone: (45) (39) 20 77 77 FAX: (45) (39) 20 80 10 E-mail: mk@niph.dk Web site: <a href="http://www.niph.dk">www.niph.dk</a>



## Estonia

<b>Title</b>	Living Conditions Survey
<b>Responsible agency or ministry</b>	Statistical Office of Estonia Ministry of Social Affairs
<b>Objective</b>	To provide national data on the living conditions, health, social contacts, composition of households, sense of security, workplace conditions, economic situation, and migration.
<b>Scope</b>	Multistage probability sample of 5,000 individuals 18–74 years of age.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1994 and 1999.
<b>Availability of data</b>	Public-use data files and statistical reports presenting the survey findings.
<b>Contact</b>	Mr. Gleb Denissov Statistical Office of Estonia 15 Endla Street 15 174 Tallin, Estonia Phone: (372) 45 39 224 FAX: (372) 62 59 370 E-mail: gleb.denissov@stat.ee

## Estonia

<b>Title</b>	National Health Interview Survey
<b>Responsible agency or ministry</b>	Statistical Office of Estonia Institute of Experimental and Clinical Medicine
<b>Objective</b>	To provide national data on health, illnesses, nutrition, social contacts, consumption of alcohol, smoking habits, psychological well-being, and health habits.
<b>Scope</b>	Probability sample of 5,000 individuals 16 years of age and over.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Fixed core data component — composition of household, nutrition, chronic illness, physician visits, medical insurance, consumption of alcohol, smoking habits, physical activities, lifestyle, disability, psychological well-being, health habits, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Every 8 years beginning in 1996.
<b>Availability of data</b>	Public-use data files and statistical reports presenting the survey findings.
<b>Contact</b>	Mr. Gleb Denissov Statistical Office of Estonia 15 Endla Street 15 174 Tallin, Estonia Phone: (372) 45 39 224 FAX: (372) 62 59 370 E-mail: <a href="mailto:gleb.denissov@stat.ee">gleb.denissov@stat.ee</a>

## Finland

<b>Title</b>	The Finnish National Health Survey
<b>Responsible agency or ministry</b>	National Public Health Institute (KTL)
<b>Objective</b>	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 1990s.
<b>Scope</b>	6,000 households representing the entire population.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1964, 1968, 1976, 1987, and 1995.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Arpo Aromaa National Public Health Institute (KTL) Mannerheimintie 166 FIN-00300 Helsinki, Finland Phone: (358) (9) 4744 8770 FAX: (358) (9) 4744 8760 E-mail: Arpo.Aromaa@ktl.fi

## Finland

<b>Title</b>	Mini-Finland Health Survey
<b>Responsible agency or ministry</b>	National Public Health Institute (KTL)
<b>Objective</b>	To produce information that serves to promote, monitor, and project the health status and the functional and work capacity of the general population.
<b>Scope</b>	The original Mini-Finland Health Survey was a two-stage stratified cluster sample of the population 30 years of age and over, approximately 8,000 persons. Follow-up studies have had varying size samples.
<b>Collection method</b>	Interviewer-administered questionnaire, health examination, and a comprehensive clinical examination of the whole sample of 8,000 persons.
<b>Data content</b>	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; ECG; blood and urine tests; tests for muscle strength; locomotor system tests; tests to assess mental health, psychological and psychomotor performance; and dental examination.
<b>Frequency</b>	Conducted in 1977–81.
<b>Availability of data</b>	Statistical reports and main results in several publications.
<b>Contact</b>	Arpo Aromaa National Public Health Institute (KTL) Mannerheimintie 166 FIN-00330 Helsinki, Finland Phone: (358) (9) 4744 8770 FAX: (358) (9) 4744 8760 E-mail: Arpo.Aromaa@ktl.fi

## Finland

<b>Title</b>	Finrisk—97 Senior Survey
<b>Responsible agency or ministry</b>	National Public Health Institute (KTL)
<b>Objective</b>	To assess health and functional ability as well as use and need of care of people aged 65–74 and to evaluate trends of health status in this age group.
<b>Scope</b>	Random samples of 750 individuals in two regions were interviewed and examined. Home visits were paid to persons who did not come to the health examination.
<b>Collection method</b>	Interviewer-administered questionnaire, health examination, and a comprehensive clinical examination.
<b>Data content</b>	<p>Interview and questionnaires—perceived morbidity, known diseases, functional ability and limitations, use and need of health services, health behavior, social and demographic characteristics.</p> <p>Clinical examination and measurements—medical history, physical examination, anthropometric measures, blood pressure, electrocardiogram (ECG), PEF, vision, hearing, muscle strength, walking speed and other locomotor system tests, and tests to assess mental performance.</p> <p>Home visits—part of the same interviews and measurements as in the health examination.</p>
<b>Frequency</b>	Conducted in 1997. Planned every 5 years.
<b>Availability of data</b>	Statistical reports and main results published 2000.
<b>Contact</b>	<p>Arpo Aromaa  National Public Health Institute (KTL)  Mannerheimintie 166  FIN-00330 Helsinki, Finland  Phone: (358) (9) 4744 8770  FAX: (358) (9) 4744 8760  E-mail: Arpo.Aromaa@ktl.fi</p>

## Finland

<b>Title</b>	The Health 2000 Examination Survey
<b>Responsible agency or ministry</b>	National Public Health Institute (KTL)
<b>Objective</b>	To measure assessment of health of the national population of Finland. To obtain data on health and functional capacity.
<b>Scope</b>	8,028 persons aged 30 or over, 88 percent were interviewed, 80 percent attended a comprehensive health examination, and 5 percent attended a condensed examination at home.
<b>Collection method</b>	Health examination and condensed at-home examination.
<b>Data content</b>	Health assessment of illness, disease, mental health, weight, smoking, and alcohol consumption.
<b>Frequency</b>	Conducted in 2000–2001.
<b>Availability of data</b>	Publications.
<b>Contact</b>	Arpo Aromaa National Public Health Institute (KTL) Mannerheimintie 166 FIN-00330 Helsinki, Finland Phone: (358) (9) 4744 8770 FAX: (358) (9) 4744 8760 E-mail: Arpo.Aromaa@ktl.fi

## France

<b>Title</b>	French Health Survey
<b>Responsible agency or ministry</b>	Institut National de la Statistique et des Études Économiques (INSEE)
<b>Objective</b>	To provide national data on health status and health care utilization of the noninstitutionalized population of France.
<b>Scope</b>	Sample of 8,000 households covering about 21,000 persons. Subsample of 8,000 persons (1 per household) for special data processing.
<b>Collection method</b>	Interviewer-administered questionnaire and 12 weeks health care consumption diary filled out by patients.
<b>Data content</b>	Physician visits, medical consumption, pharmaceuticals, hospitalization, health status, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Decennial. Conducted in 1960, 1970, 1980, and 1991–92.
<b>Availability of data</b>	Statistical reports presenting the survey findings.
<b>Contact</b>	Institut National de la Statistique et des Études Économiques (INSEE) 18 BLD Adolphe Pinard 75675 Paris Cedex 14, France Phone: (33) (1) 41 17 50 50 FAX: (33) (1) 41 17 62 79

## France

<b>Title</b>	National Inpatients Survey
<b>Responsible agency or ministry</b>	Centre de Recherche, d'Étude et de Documentation en Économie de la Santé (CREDES)
<b>Objective</b>	To provide national data on the health care utilization of the hospitalized population of France.
<b>Scope</b>	Sample of 5,000 persons.
<b>Collection method</b>	Hospital-based doctor-administered questionnaire.
<b>Data content</b>	Medical consumption, pharmaceuticals, hospitalization, health status, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1981 and 1991–92.
<b>Availability of data</b>	Statistical reports presenting the survey findings.
<b>Contact</b>	<p>Dominique Polton  CREDES  1 rue Paul-Cézanne  75008 Paris, France  Phone: (33) (1) 53 93 43 10  FAX: (33) (1) 53 93 43 50  E-mail: polton@credes.fr</p>



## France

<b>Title</b>	Health and Social Protection Survey
<b>Responsible agency or ministry</b>	Centre de Recherche, d'Étude et de Documentation en Économie de la Santé (CREDES)
<b>Objective</b>	To provide national data on health status and health care utilization of the noninstitutionalized population of France.
<b>Scope</b>	Sample of 20,000 persons since 1998.
<b>Collection method</b>	Interviewer-administered questionnaire and 4 weeks health care consumption diary filled out by patients.
<b>Data content</b>	Medical consumption, pharmaceuticals, hospitalization, health status, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Annual between 1988 and 1997; biannual since 1998.
<b>Availability of data</b>	Statistical reports presenting the survey findings.
<b>Contact</b>	<p>Dominique Polton  CREDES  1 rue Paul-Cézanne  75008 Paris, France  Phone: (33) (1) 53 93 43 10  FAX: (33) (1) 53 93 43 50  E-mail: polton@credes.fr</p>

## Germany

<b>Title</b>	Questions on Health—Microcensus Supplementary Survey
<b>Responsible agency or ministry</b>	Federal Statistical Office
<b>Objective</b>	To provide national data on illness and accidental injury rates of the population.
<b>Scope</b>	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 titled <i>Questions on Health</i> 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.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Irregular intervals up to 1963. Triennial from 1986 to 1995. Every 4 years since 1995.
<b>Availability of data</b>	Public-use publications (papers, special editions) and special analyses on request (charges apply).
<b>Contact</b>	Federal Statistical Office Section Health Statistics D-65180 Wiesbaden, Germany Phone: (49) (611) 75 23 55 FAX: (49) (611) 75 39 63

## Germany

<b>Title</b>	National Health Examination and Interview Survey
<b>Responsible agency or ministry</b>	Robert Koch Institute
<b>Objective</b>	To provide national data on the prevalence of specific diseases, risk factors, and ailments, on health relevant living conditions and lifestyle, as well as data on health care and the utilization of medical services.
<b>Scope</b>	Multistage probability sample of 7,124 individuals of the noninstitutionalized population, 18–79 years of age were interviewed and examined.
<b>Collection method</b>	Self-administered questionnaire, medical interview (CAPI), diagnostics of blood and urine, physical measurements.
<b>Data content</b>	Demographic and socioeconomic characteristics, health status, chronic conditions, drug utilization, disability, risk factors, more than 40 blood and urine parameters, blood pressure, pulse, height, weight, waist and hip circumference, health behavior, nutrition, lifestyle, health care, and utilization of medical services.
<b>Frequency</b>	October 1997–March 1999. Planned every 6–8 years.
<b>Availability of data</b>	Public-use data file, reports presenting the survey findings.
<b>Contact</b>	Dr. Bärbel-Maria Kurth Department of Epidemiology and Health Monitoring Robert Koch Institute Nordufer 20 D–13353 Berlin, Germany Phone: (49) (30) 4547 3103 FAX: (49) (30) 4547 3181 E-mail: Kurthb@rik.de

## Hungary

<b>Title</b>	Health Interview Survey
<b>Responsible agency or ministry</b>	Central Statistical Office
<b>Objective</b>	To provide data on the population's state of health and the influencing and determining factors relating to chronic illnesses and sicknesses.
<b>Scope</b>	Stratified multistaged sample of 16,000 addresses covering about 37,500 persons. Noninstitutionalized population of persons aged 15 years and over were interviewed.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Health complaints, utilization of health services, nutrition, smoking habits, medicine consumption, practicing sports, working conditions, occupational hazards, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1984.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Dr. Péter Józán Hungarian Central Statistical Office Population, Health and Social Statistics Department 5-7 Keleti Károly Street P.O. Box 51 H-1525 Budapest, Hungary Phone: (36) (1) 345 6890 FAX: (36) (1) 345 6678

## Hungary

<b>Title</b>	Health Behavior Survey
<b>Responsible agency or ministry</b>	Central Statistical Office
<b>Objective</b>	To provide information on the frequency of risk factors relating to chronic illnesses and sicknesses.
<b>Scope</b>	Stratified multistaged sample of 5,476 persons 15–64 years of age.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Chronic conditions, nutrition, smoking habits, alcohol consumption, physical activity, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1994.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Dr. Péter Józán Hungarian Central Statistical Office Population, Health and Social Statistics Department 5–7 Keleti Károly Street P.O. Box 51 H–1525 Budapest, Hungary Phone: (36) (1) 345 6890 FAX: (36) (1) 345 6678

## Hungary

<b>Title</b>	National Health Interview Survey
<b>Responsible agency or ministry</b>	Health Promotion Research Institute (from 2001 October: "Johan Bela" National Center for Epidemiology)
<b>Objective</b>	To provide data on the population's state of health and the influencing and determining factors relating to health status, health behavior, and burden of diseases.
<b>Scope</b>	Stratified multistaged sample of 7,000 persons. Noninstitutionalized population of persons aged 18 years and over were interviewed.
<b>Collection method</b>	Interviewer-administered questionnaire and self-administered questionnaire.
<b>Data content</b>	Health status (functionality, perceived health, quality of life, chronic conditions, mental health), health behavior (nutrition, smoking habits, alcohol consumption, physical activity, sexual behavior, multiple lifestyle risks), health care utilization, health care expenditures, medicine consumption, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 2000.
<b>Availability of data</b>	Statistical reports ( <a href="http://www.antsz.hu/oek">www.antsz.hu/oek</a> ).
<b>Contact</b>	Dr. József Vitrai "Johan Bela" National Center for Epidemiology Department of Health Monitoring and Epidemiology of Non-Communicable Diseases 1097 Budapest Gyali ut 2–6, Hungary Phone: (36) (1) 476 1100/2225 FAX: (36) (1) 476 1100/2225 E-mail: <a href="mailto:vitrai.oek@antsz.hu">vitrai.oek@antsz.hu</a> Web site: <a href="http://www.antsz.hu/oek">www.antsz.hu/oek</a>

## Iceland

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

## Iceland

<b>Title</b>	Multipurpose Survey (surveys on health promotion)
<b>Responsible agency or ministry</b>	Directorate of Health/ Ministry of Health and Social Security
<b>Objective</b>	To provide national data on lifestyles, risk factors of chronic diseases and accidents, living conditions, employment, working conditions, and health.
<b>Scope</b>	Random sample of 1,500 persons 18–75 years of age.
<b>Collection method</b>	Telephone interviewer-administered questionnaire.
<b>Data content</b>	Lifestyle, risk factors, family status, income, political views, smoking habits, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1994 and 1996.
<b>Availability of data</b>	Statistical reports presenting the survey findings.
<b>Contact</b>	Ms. Anna Bjrg Aradóttir The Icelandic Health Promotion Project Ministry of Health and Social Security Laugavegur 116 IS-150 Reykjavík, Iceland Phone: (354) 562 7555 FAX: (354) 562 3716



## Iceland

<b>Title</b>	Health and Living Conditions in Iceland (Heibrigdi og lifskjör Íslendinga)
<b>Responsible agency or ministry</b>	University of Iceland
<b>Objective</b>	To study the social distribution of life stress and lifestyle factors and their relationship with mental and physical health. To study the utilization of health services and the extent to which group differences in services use reflect variations in need for services or underutilization by certain population groups.
<b>Scope</b>	The survey data includes 1,924 Icelanders, age 18–75, randomly selected from the National Register. Eligible participants were Icelandic citizens or long-term residents of Iceland, who were not institutionalized in long-term facilities at the start of the survey.
<b>Collection method</b>	Postal survey based on a simple random sample from the National Register. Administration of the survey follows the Total Design Method (TDM) for postal surveys.
<b>Data content</b>	Perceived health status, functional disability, physical symptoms, chronic diseases/conditions, psychological symptoms (distress), personal attitudes/beliefs, use of formal and alternative health services including preventive services, illness behavior, life events, chronic (ongoing) difficulties, perceived stress, perceived role functioning, perceived importance of roles, health-related behavior, social interaction and social support, as well as demographic and socioeconomic characteristics.
<b>Frequency</b>	Panel study 1998 and 1999 (1999 used a reduced version of the questionnaire).
<b>Availability of data</b>	Data analysis upon request (charges apply).
<b>Contact</b>	Runar Vilhjálmsson, Ph.D. University of Iceland Department of Nursing Eirbergi, Eiríksgötu 34 IS-101 Reykjavík, Iceland Phone: (354) 525 4960 FAX: (354) 525 4963 E-mail: runarv@hi.is

## Ireland

<b>Title</b>	The National Health and Lifestyle Surveys
<b>Responsible agency or ministry</b>	Information Management Unit, Department of Health and Children
<b>Objective</b>	To provide reliable baseline data for a representative cross section of the Irish population which will inform the Department of Health and Children's future policy and program planning. To establish a survey protocol which will enable lifestyle factors to be remeasured so that trends can be identified and changes monitored to assist national and regional setting of priorities in health promotion activities.
<b>Scope</b>	Two surveys were carried out. The first, entitled Survey of Lifestyle, Attitudes and Nutrition (SLÁN), was a multistage sample of 6,539 adults 18 years of age and over drawn from the elector register. The second survey, Health Behaviour in School-Aged Children (HBSC), was a cluster sample of 8,497 school-going children aged 9–17 from 187 schools based on the protocols set by the World Health Organization-HBSC collaborative study in which 29 individual countries participated.
<b>Collection method</b>	SLÁN—Postal questionnaire HBSC—Interviewer-administered questionnaire.
<b>Data content</b>	Seven key health and lifestyle indicators were measured in both surveys: general health, smoking, alcohol, food and nutrition, exercise, cholesterol, and accidents.
<b>Frequency</b>	First survey carried out during 1998 and to be repeated every 3 years.
<b>Availability of data</b>	Report published February 1999.
<b>Contact</b>	Tim McCarthy Information Management Unit Department of Health and Children Hawkins House Dublin 2, Republic of Ireland Phone: (353) (1) 635–4299 FAX: (353) (1) 635–4378 E-mail: Tim_McCarthy@health.irlgov.ie

## Israel

<b>Title</b>	Health Services Survey
<b>Responsible agency or ministry</b>	Central Bureau of Statistics
<b>Objective</b>	To provide national data on the use and users of ambulatory health services of the civilian noninstitutionalized population, as well as health status.
<b>Scope</b>	Approximately 9,000 households covering about 30,000 persons of all ages were included in the survey. The survey includes all households sampled in the Labor Force Survey; excluded were soldiers in the regular army service, persons residing in institutions, and Bedouins residing outside permanent settlements.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Visits to general physicians and specialists in ambulatory clinics, length of wait for hospital admission, hospitalization, use of preventive health services, health insurance, chronic illness, health conditions, disability, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Variable. Conducted in 1977, 1981, 1993, 1996–1997, and 1999–2000.
<b>Availability of data</b>	Public-use tapes, statistical reports presenting the survey findings.
<b>Contact</b>	Ms. Naama Rotem Prime Minister's Office Central Bureau of Statistics 66 Kanfei Nesharim, Corner Bachi St. Jerusalem 95464, Israel Phone: (972) (2) 659 2543 FAX: (972) (2) 659 2503

## Israel

<b>Title</b>	Survey of the Elderly
<b>Responsible agency or ministry</b>	Central Bureau of Statistics
<b>Objective</b>	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.
<b>Scope</b>	The target population included 5,000 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, households within institutions, hotels, and boarding houses. A sample frame was drawn from the 1995 Census of Populations. Approximately 3,500 households were included.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Housing conditions, health condition, physical condition, disability, smoking and nutrition habits, utilization of health services, patterns and ability in instrumental activities of daily living, leisure and voluntary activity, demographic and socioeconomic characteristics, and exposure to the Nazi Regime.
<b>Frequency</b>	Conducted in 1982, 1985, 1997, and 1998.
<b>Availability of data</b>	Public-use tapes, statistical reports presenting the survey findings.
<b>Contact</b>	Ms. Susana Zaritzky Central Bureau of Statistics 66 Kanfey Nesharim, Corner Bachi St. P.O.B. 34525 Jerusalem 91342, Israel Phone: (972) (2) 659 2411 FAX: (972) (2) 659 2470 E-mail: susana@census.cbs.gov.il

## Italy

<b>Title</b>	Survey of Health Conditions of the Population and the Use of Health Services
<b>Responsible agency or ministry</b>	The National Institute of Statistics
<b>Objective</b>	To gather information about the health status and medical consumption of the population of Italy.
<b>Scope</b>	Two-stage sampling design with municipalities being the primary sampling units; for 1999–2000, 60,000 households covering 140,000 persons.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Acute and chronic sickness symptoms, medical examinations, doctor consultations, hospital stays, medicines, smoking, drinking, physical activity, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1980, 1983, 1986, 1990–91, 1994, and 1999–2000.
<b>Availability of data</b>	Public-use tapes and statistical reports presenting survey findings.
<b>Contact</b>	Antonella Ciccarese ISTAT (Istituto Nazionale Di Statistica) Servizio Sanità e Mortalità per causa Viale Liegi, 13 00198 Roma, Italy Phone: (39) (6) 8522 7402 FAX: (39) (6) 8535 4401

## Japan

<b>Title</b>	Comprehensive Survey of Living Conditions of People on Health and Welfare
<b>Responsible agency or ministry</b>	Ministry of Health, Labour and Welfare
<b>Objective</b>	To provide data on 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.
<b>Scope</b>	Stratified random sample of all households and household members in 5,240 districts. Approximately 280,000 households and 780,000 household members are surveyed.
<b>Collection method</b>	Interviewer-administered questionnaire on household and income; self-administered questionnaire on health and savings.
<b>Data content</b>	Health status, chronic diseases, acute illnesses, bed days, quality of life, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Triennial, beginning in 1986.
<b>Availability of data</b>	Public-use summary data files and statistical reports.
<b>Contact</b>	Yoko Kanegae Statistics and Information Department Minister's Secretariat Ministry of Health, Labour and Welfare 1-2-2 Kasumigaseki Chiyoda-ku Tokyo 100-8916, Japan Phone: (81) (3) 5253-1111, ext. 7377 FAX: (81) (3) 3595-1607 E-mail: kanegae-yoko@mhlw.go.jp

## Korea, Republic of

<b>Title</b>	Patients Survey
<b>Responsible agency or ministry</b>	Ministry of Health and Welfare
<b>Objective</b>	To provide national data on disease conditions of the population and use of medical institutions.
<b>Scope</b>	Census of 842 general hospitals, health centers, etc. Sample of 4,845 clinics, health subcenters, etc. Survey includes patients who use these institutions during the survey period.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Hospital data—name, number of beds, medical personnel. Patient data—diagnosis, medical treatment period and results, doctor's fee, age, and sex.
<b>Frequency</b>	Biennial from 1988 to 1996. Triennial since 1996.
<b>Availability of data</b>	Statistical reports (Korean language only).
<b>Contact</b>	Information Planning Division 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

## Korea, Republic of

<b>Title</b>	National Nutrition Survey
<b>Responsible agency or ministry</b>	Ministry of Health and Welfare
<b>Objective</b>	To provide national data on health and nutrition conditions of the population.
<b>Scope</b>	Probability sample of 4,000 households covering about 12,000 persons.
<b>Collection method</b>	Observational.
<b>Data content</b>	Nutrient intake, food intake, physical standard condition, hemoglobin level, blood pressure, living environment, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Annual 1969 to 1998. Triennial beginning 1998.
<b>Availability of data</b>	Statistical reports (Korean language only).
<b>Contact</b>	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) 504-1394



## Korea, Republic of

<b>Title</b>	Social Statistics Survey
<b>Responsible agency or ministry</b>	National Statistical Office
<b>Objective</b>	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.
<b>Scope</b>	Sample of 30,000 households selected from 1,219 enumeration districts that were selected from 22,029 enumeration districts of the 1995 population census.
<b>Collection method</b>	Standardized interview.
<b>Data content</b>	<p>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.</p> <p>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.</p>
<b>Frequency</b>	Annual 1977–1996. (Semiannual only 1997.)
<b>Availability of data</b>	Statistical reports (Korean and English).
<b>Contact</b>	<p>Mr. Bong-Ho Choi  National Statistical Office  Government Complex III  920, Dunsan-dong, Seo-gu  Taejeon 302-701  Republic of Korea  Phone: (82) (42) 472-2615  FAX: (82) (42) 481-2465</p>

## Korea, Republic of

<b>Title</b>	National Health Interview Survey
<b>Responsible agency or ministry</b>	Korean Institution for Health and Social Affairs
<b>Objective</b>	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.
<b>Scope</b>	Survey of 6,605 households.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Prevalence of chronic diseases, incidence of acute illnesses, bed days, hospitalizations, utilization of health services, health expenditures, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Triennial since 1983.
<b>Availability of data</b>	Statistical reports (Korean language only).
<b>Contact</b>	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) 382-4581

## Latvia

<b>Title</b>	Epidemiologic Research on Most Common Noninfectious Diseases
<b>Responsible agency or ministry</b>	Latvian Academy of Medicine; Latvian Institute of Cardiology; Health Department of the Ministry of Welfare of Latvia
<b>Objective</b>	To assess prevalence of most common noninfectious diseases and their risk factors in Latvia.
<b>Scope</b>	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.
<b>Collection method</b>	Interviewer-administered questionnaire and objective measurements.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1991.
<b>Availability of data</b>	Published reports in 1993. Ongoing data analysis.
<b>Contact</b>	G. Brigis Department of Public Health and Epidemiology Latvian Academy of Medicine 16, Dzirciema street Rīga LV—1007, Latvia Phone: (371) 733 8310 FAX: (371) 782 8155

## Latvia

<b>Title</b>	Living Conditions Survey
<b>Responsible agency or ministry</b>	Central Statistical Bureau of Latvia The Norwegian Institute for Applied Social Science
<b>Objective</b>	To contribute necessary and reliable information on the real conditions of life in Latvia.
<b>Scope</b>	Sample size of 3,500 respondents who are permanent inhabitants of Latvia, 18 years of age and over.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Housing, education, employment, labor conditions, health status, health care utilization, security, crime and violence, migration, social life and activity, public opinion, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1994 and 1999.
<b>Availability of data</b>	Preliminary report published in 1994; final report published in late 1995 (in Latvian and English). Final report about 1999 published in 2001 (in Latvian and English).
<b>Contact</b>	Inta Vasaraudze Department of Social Statistics Central Statistical Bureau of Latvia Lacplesa street 1 Rīga LV—1301, Latvia Phone: (371) 366 847 FAX: (371) 783 0137 or Anita Švarckofa Department of Social Statistics Central Statistical Bureau of Latvia Lacplesa street 1 Rīga LV—1301, Latvia Phone: (371) 366 847 E-mail: <a href="mailto:csb@csb.lv">csb@csb.lv</a>

## Latvia

<b>Title</b>	Survey of Population About the Health Care System in Latvia
<b>Responsible agency or ministry</b>	Health Statistics and Medical Technology Agency
<b>Objective</b>	Determine the relation between morbidity, medical care accessibility, and health insurance. Clarify opinion of population about health care system.
<b>Scope</b>	Sample size of 4,000 permanent inhabitants of Latvia. Working-capable population 30–65 years of age (in 5-year age intervals). Included 2,759 in the study analysis.
<b>Collection method</b>	Cross-sectional study of population standard cluster summarizing retrospective data and information obtained from postal questionnaire.
<b>Data content</b>	There are 21 questions in the questionnaire divided into blocks. The socioeconomic block included place of residence, age, sex, civil status, number of children, education, profession, income, and type of health insurance (voluntary, employers). The medical care service use block included choice of family doctor and visits to the physician. The medical care accessibility block included distance to the medical institution, time used, shortage of money for patients' payment and treatment expenses, medicine acquisition, worry about medical personnel knowledge and experience, deficiency of specialists, queues, and rare consultation hours.
<b>Frequency</b>	Conducted in 1998 and 1999.
<b>Availability of data</b>	Published reports in 2000 (in Latvian). Short report is also available in English.
<b>Contact</b>	Jautrite Karashkevica Deputy Director in Health Statistics and Medical Technology Agency Duntes street 12/22 Rīga LV—1005, Latvia FAX: (371) 75 01 591 E-mail: jautrite@vsmta.lv

## Latvia

<b>Title</b>	Health Behavior Among Latvian Adult Population
<b>Responsible agency or ministry</b>	Health Promotion Centre, Latvia; National Public Health Institute, Helsinki, Finland.
<b>Objective</b>	To collect information about individual health behaviors and to evaluate actual and potential public health problems associated with health behaviors.
<b>Scope</b>	Sample size of 3,000 permanent inhabitants of Latvia, 15–64 years of age; 2,400 completed surveys were returned.
<b>Collection method</b>	Postal questionnaire.
<b>Data content</b>	Demographic characteristics (gender, age, nationality, place of residence, marital status, education, occupation, and income), health-related behaviors (smoking, nutrition, physical activity, and alcohol consumption), behavioral change, participation in health promotional activities, issues related to health services and health policy, health status, self-assessment of health, and knowledge about various health aspects.
<b>Frequency</b>	Conducted in 1998 and 2000.
<b>Availability of data</b>	Published in 1999, 2001 (in Latvian and English).
<b>Contact</b>	Iveta Pudule Health Promotion Centre Skolas street 3 Rīga LV—1010, Latvia FAX: (371) 724 0446

## Netherlands

<b>Title</b>	Permanent Survey on Living Conditions (Permanent Onderzoek LeefSituatie: POLS)
<b>Responsible agency or ministry</b>	Statistics Netherlands
<b>Objective</b>	To describe the distribution of and relations between socioeconomic characteristics, employment, working conditions, housing conditions, environment, time use and leisure, social participation, justice and security, accidents, and health and well-being. The data will serve as background for policy and planning purposes.
<b>Scope</b>	Random sample of households covering approximately 36,000 persons per year (one person per household). Excludes persons living in homes for the elderly, nursing homes, convents, prisons, shelters, and those belonging to the sailing population or not having a fixed abode.
<b>Collection method</b>	Interviewer-administered questionnaire; a small part of the questionnaire is self-administered.
<b>Data content</b>	Household composition, employment and working conditions, housing conditions, leisure activities, security, participation in society, health status, medical consumption, lifestyle and risk factors, accidents, social interaction, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Continuous from January 1997 onward.
<b>Availability of data</b>	Statistical reports presenting survey findings.
<b>Contact</b>	Mrs. J.J.M. Geurts Statistics Netherlands Division of Sociocultural Statistics Department of Sociocultural Household Surveys P.O. Box 4481 6401 CZ Heerlen, The Netherlands Phone: (31) (45) 570 7201 FAX: (31) (45) 570 6274 E-mail: JGTS@cbs.nl Web site: <a href="http://www.cbs.nl">www.cbs.nl</a>

## Netherlands

<b>Title</b>	Quality of Life Survey (part of Permanent Survey of Living Conditions)
<b>Responsible agency or ministry</b>	Statistics Netherlands
<b>Objective</b>	To describe the 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.
<b>Scope</b>	Random sample of households, covering approximately 3,500 persons per year (one person per household) of residents 18 years of age and over; from 1997 onwards the sample is of individuals. Sample excludes persons in homes for the elderly, nursing homes, convents, prisons, shelters, and those belonging to the population not having a fixed abode.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted every third year, 1974–86. Continuous since 1989.
<b>Availability of data</b>	Statistical reports presenting survey findings, mainly in the database.
<b>Contact</b>	Dr. F. Otten Statistics Netherlands Division of Sociocultural Statistics Department of Sociocultural Household Surveys P.O. Box 4481 6401 CZ Heerlen, The Netherlands Phone: (31) (45) 570 7275 FAX: (31) (45) 570 6274 Web site: <a href="http://www.cbs.nl">www.cbs.nl</a>



## Netherlands

<b>Title</b>	National Health Interview Survey (part of Permanent Survey of Living Conditions)
<b>Responsible agency or ministry</b>	Statistics Netherlands
<b>Objective</b>	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.
<b>Scope</b>	Random sample of 3,000 private (noninstitutionalized) households covering approximately 9,000 persons per year. All persons (maximum of four) in the selected households were interviewed; from 1997 onward the sample is of individuals. Samples exclude persons in nursing homes, convents, homes for the elderly, prisons, shelters, and those belonging to the population not having a fixed abode.
<b>Collection method</b>	Interviewer-administered questionnaire and self-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Continuous since 1981.
<b>Availability of data</b>	Statistical reports presenting survey findings, mainly in the base.
<b>Contact</b>	Dr. F. Otten Statistics Netherlands Division of Sociocultural Statistics Department of Sociocultural Household Surveys P.O. Box 4481 6401 CZ Heerlen, The Netherlands Phone: (31) (45) 5707275 FAX: (31) (45) 5706274 Web site: <a href="http://www.cbs.nl">www.cbs.nl</a>

## Netherlands

<b>Title</b>	National Health Interview Survey of Turkish Inhabitants in the Netherlands
<b>Responsible agency or ministry</b>	Statistics Netherlands
<b>Objective</b>	To supply basic information on the Turkish population in the Netherlands and 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.
<b>Scope</b>	Random sample covering 5,306 Turkish residents in the Netherlands (noninstitutionalized population); excludes persons in nursing homes, convents, homes for the elderly, prisons, shelters, and those belonging to the population not having a fixed abode.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1989–90.
<b>Availability of data</b>	Statistical reports presenting survey findings.
<b>Contact</b>	Mrs. J.J.M. Geurts Statistics Netherlands Division of Sociocultural Statistics Department of Sociocultural Household Surveys P.O. Box 4481 6401 CZ Heerlen, The Netherlands Phone: (31) (45) 570 7201 FAX: (31) (45) 570 6274 E-mail: JGTS@cbs.nl Web site: <a href="http://www.cbs.nl">www.cbs.nl</a>

## New Zealand

<b>Title</b>	New Zealand Health Survey
<b>Responsible agency or ministry</b>	Ministry of Health
<b>Objective</b>	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 satisfaction and perceptions of their health services; to measure individual health status and unmet need for health services; and to provide information on selected health behavior not nationally available at present.
<b>Scope</b>	Stratified random sample of 12,000 persons. Civilian population (including institutionalized) of all ages residing in private households. One respondent per household was interviewed. Over sampling of Maori, Pacific People, and Asians.
<b>Collection method</b>	Interviewer-administered questionnaire and self-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1992–93 and 1996–97.
<b>Availability of data</b>	Statistical reports (charges apply).
<b>Contact</b>	Public Health Intelligence Ministry of Health P.O. Box 5013 Wellington, New Zealand Phone: (64) (4) 496 2000 FAX: (64) (4) 495 4401

## New Zealand

<b>Title</b>	National Nutrition Survey
<b>Responsible agency or ministry</b>	Ministry of Health
<b>Objective</b>	To determine the food and nutrient intake, food security, barriers to dietary change, key food habits, organochlorine exposure, dietary supplement intake, and physical and biochemical status of the New Zealand adult population.
<b>Scope</b>	Stratified random sample of 5,000 people. Civilian noninstitutionalized population 15 years of age and over residing in private households. One respondent per household will be interviewed.
<b>Collection method</b>	Interviewer-administered questionnaire and self-administered questionnaire.
<b>Data content</b>	Nutrient and food data for multiple pass 24-hour dietary recall, usual food intake from qualitative food frequency questionnaire, food security, key food habits, barriers to dietary change, organochlorine exposure, dietary supplement intake, height, weight, subscapular and triceps skin folds, mid-upper arm, waist and hip circumference, elbow width, blood pressure, blood samples, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1996–97. Planned frequency of every 5–10 years.
<b>Availability of data</b>	Anonymous data set and statistical reports (charges apply). Confidential, request must be signed.
<b>Contact</b>	Public Health Intelligence Ministry of Health P.O. Box 5013 Wellington, New Zealand Phone: (64) (4) 496 2000 FAX: (64) (4) 495 4401

## Norway

<b>Title</b>	Level of Living: Multipurpose Survey on Living Conditions (Rotating themes from year to year: working environment study; time use study; health interview survey)
<b>Responsible agency or ministry</b>	Statistics Norway
<b>Objective</b>	To obtain knowledge of distribution of the level of living in the Norwegian population, including some health conditions.
<b>Scope</b>	Two-stage sample covering 5,100 persons and approximately the same number of households. All persons 16 years of age and over were interviewed. (Some questions were asked about the children in the household.)
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Chronic illness, mental health and long-term disability, working conditions, care and housework, housing conditions, social relations, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted annually beginning in 1996.
<b>Availability of data</b>	Data published 2000 and available on Web site.
<b>Contact</b>	Berit Otnes/Arne Andersen Statistics Norway Division of Social Welfare Statistics P.O. Box 8131 Dep. N-0033 Oslo, Norway Phone: (47) (21) 09 00 00 FAX: (47) (21) 09 44 04 E-mail: asa@ssb.no Web site: <a href="http://www.ssb.no/emner">www.ssb.no/emner</a>

## Norway

<b>Title</b>	Level of Living: Working Environment (Multipurpose survey on living conditions)
<b>Responsible agency or ministry</b>	Statistics Norway
<b>Objective</b>	To shed light on the main features of the working conditions and working environments as experienced by different groups of employees.
<b>Scope</b>	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. Some 4,359 employees in 1,050 establishments were surveyed. From 1996, based on a two-stage sample of persons 16–66 years of age.
<b>Collection method</b>	Interviewer-administered questionnaire (CATi, CAPI).
<b>Data content</b>	Health and symptoms, mental health, absence due to illness, physical and organizational working conditions, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1989, 1993, 1996, and 2000.
<b>Availability of data</b>	Statistical reports presenting survey findings and available on Web site.
<b>Contact</b>	Berit Otnes/Arne Andersen Statistics Norway Division of Social Welfare Statistics P.O. Box 8131 Dep. N-0033 Oslo, Norway Phone: (47) (21) 09 00 00 FAX: (47) (21) 09 44 04 E-mail: asa@ssb.no Web site: <a href="http://www.ssb.no/emner/06/02">www.ssb.no/emner/06/02</a>

## Norway

<b>Title</b>	Level of Living: Health Conditions (Multipurpose survey on living conditions)
<b>Responsible agency or ministry</b>	Statistics Norway
<b>Objective</b>	To obtain knowledge of health problems in the Norwegian population as a whole and to reveal inequalities regarding health conditions between different groups in the population. Also to trace the use of health services.
<b>Scope</b>	Two-stage, stratified probability sample of 75,000 persons 16 years of age and over. (Children will be included in some study years, ad hoc.)
<b>Collection method</b>	Interviewer-administered questionnaire (CATi, CAPI) and self-administered questionnaire.
<b>Data content</b>	Prevalence of chronic diseases, reduced activity, occurrence of acute illness in the last 14 days, contact with the health service, lifestyle, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1968, 1975, 1985, 1995, 1998, and 2002.
<b>Availability of data</b>	Statistical reports published 2000 and available on Web site.
<b>Contact</b>	Ann Lisbeth Brathaug/Jorun Ramm Statistics Norway Division of Social Welfare Statistics P.O. Box 8131 Dep. N-0033 Oslo, Norway Phone: (47) (21) 09 00 00 FAX: (47) (21) 09 44 04 E-mail: jrm@ssb.no Web site: <a href="http://www.ssb.no/emner/03/01/helsforhold">www.ssb.no/emner/03/01/helsforhold</a>

## Poland

<b>Title</b>	Social Status of Household Survey
<b>Responsible agency or ministry</b>	Central Statistical Office
<b>Objective</b>	To provide information on the social status of households and some aspects of the health status of the population.
<b>Scope</b>	Sample of 120,000 households covering about 380,000 persons.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1985, 1986, 1989, and 1990. Survey includes a health component every fourth or fifth year.
<b>Availability of data</b>	Statistical tables and statistical reports published.
<b>Contact</b>	Mrs. Maria Daszyńska Central Statistical Office Living Conditions Statistics Division Al. Niepodległości 208 Warsaw 00-925, Poland Phone: (48) (22) 608 3202 FAX: (48) (22) 608 3871



## Poland

<b>Title</b>	Family Health Survey
<b>Responsible agency or ministry</b>	Central Statistical Office, Institute of Cardiology
<b>Objective</b>	To provide information on some aspects of the health status of the population.
<b>Scope</b>	Sample of 21,451 households covering about 68,000 persons.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Self-assessed health status, hospital stays and duration, impairments and disabilities, limitations of activities, chronic diseases, smoking habits, sports training, and demographic characteristics.
<b>Frequency</b>	Conducted in 1987.
<b>Availability of data</b>	Statistical reports.
<b>Contact</b>	Central Statistical Office Al. Niepodległości 208 Warsaw 00-925, Poland Phone: (48) (22) 251 802 FAX: (48) (22) 253 435 Mr. Janusz Bejnarowicz Institute of Cardiology Phone: (48) (22) 153 011, ext. 282

## Poland

<b>Title</b>	Sociodemographic and Health Determinants of Infant Mortality Survey
<b>Responsible agency or ministry</b>	Central Statistical Office Institute of Mother and Child
<b>Objective</b>	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.
<b>Scope</b>	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.
<b>Collection method</b>	Interviewer-administered (mainly nurses) questionnaire.
<b>Data content</b>	Sociodemographic characteristics of the parents, pregnancy information, mother's opinion about delivery and medical assistance, condition of infant at birth, cause of death, history of illness, type and quality of medical assistance, ecological and living conditions of family, and parents' health and lifestyle.
<b>Frequency</b>	Conducted in 1991.
<b>Availability of data</b>	Data tapes, statistical tables, report, and publication.
<b>Contact</b>	Mrs. Lucyna Nowak Central Statistical Office Demographic Statistics Division Al. Niepodległości 208 Warsaw 00-925, Poland Phone: (48) (22) 608 3121 FAX: (48) (22) 608 3181 E-mail: lnowak@stat.gov.pl

## Poland

<b>Title</b>	Health Care in Household
<b>Responsible agency or ministry</b>	Central Statistical Office
<b>Objective</b>	To provide data on household use of medical services and expenditures for main health care.
<b>Scope</b>	Sample of 5,600 households covering 17,500 persons.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Frequency of the utilization of main health services, expenditures for the services, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1994, 1998, and 2000.
<b>Availability of data</b>	Report in Polish first quarter of 1999 and September 2001.
<b>Contact</b>	Mrs. Aline Barsu Central Statistical Office Living Conditions Statistics Division Al. Niepodległości 208 Warsaw 00-925, Poland Phone: (48) (22) 608 3278 FAX: (48) (22) 608 3182

## Poland

<b>Title</b>	Disabled on the Labor Market in Poland
<b>Responsible agency or ministry</b>	Central Statistical Office
<b>Objective</b>	To provide data on the disabled persons' position on the labor market.
<b>Scope</b>	Sample of 6,700 persons 15 years of age and over who are included in the legal disabled groups.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Disability, economic activity, standard of living, and demographic and socioeconomic data with special attention to health status parameters.
<b>Frequency</b>	Conducted in 1995 and 2000.
<b>Availability of data</b>	Statistical and analytical reports in Polish.
<b>Contact</b>	<p>Mrs. Grazyna Marciniak  Central Statistical Office  Social Statistics Division  Al. Niepodległości 208  Warsaw 00-925, Poland  Phone: (48) (22) 608 3354  FAX: (48) (22) 608 3872  E-mail: G.Marciniak@stat.gov.pl</p>

## Poland

<b>Title</b>	Health Interview Survey (POLHIS 96)
<b>Responsible agency or ministry</b>	Central Statistical Office
<b>Objective</b>	To provide data on population's perceived state of health, disability, medical consumption, and some aspects of lifestyle.
<b>Scope</b>	Random sample of 19,202 households covering 47,924 adults and 14,813 children.
<b>Collection method</b>	Interviewer-administered and self-administered questionnaires.
<b>Data content</b>	Perceived health, long-term disability, temporary disability, health complaints, chronic conditions, doctor and dentist consultations, hospital stays, medicine consumption, birth control methods, leisure time activities, smoking, consumption of alcohol, rehabilitation and life conditions of disabled persons, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1996.
<b>Availability of data</b>	Data files and data tables. Statistical reports presenting survey findings in Polish.
<b>Contact</b>	Mrs. Alicja Zajenkowska-Kozłowska Central Statistical Office Demographic Statistics Division Al. Niepodległości 208 Warsaw 00-925, Poland Phone: (48) (22) 608 3207 FAX: (48) (22) 608 3181 E-mail: A.Zajenkowska@stat.gov.pl

## Portugal

<b>Title</b>	National Health Survey
<b>Responsible agency or ministry</b>	Instituto Nacional de Saúde Ministry of Health
<b>Objective</b>	To provide information on a number of major health problems.
<b>Scope</b>	Multistage probability sample of 22,000 households covering noninstitutionalized persons living in the mainland of Portugal.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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, alcoholic beverage consumption, child health, and demographic and socioeconomic characteristics. Supplementary component— varies with needs of information.
<b>Frequency</b>	Entire country, 1987, 1995–96 and 1998–99. Conducted in the Lisbon area in 1989; North area, 1990; Alentejo area, 1991; Algarve area, 1993; and mainland, 1998–99.
<b>Availability of data</b>	Data files and main data tables presented in publication.
<b>Contact</b>	Maria de Jesus Graça Instituto Nacional de Saúde Dr. Ricardo Jorge Av. Padre Cruz, 1699 1699 Lisboa Codex, Portugal Phone: (351) (1) 751 0536 FAX: (351) (1) 757 3671

## Singapore

<b>Title</b>	National Health Survey
<b>Responsible agency or ministry</b>	Epidemiology and Disease Control Division Ministry of Health
<b>Objective</b>	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.
<b>Scope</b>	Multistage sample of 4,723 Singapore residents 18–69 years of age.
<b>Collection method</b>	Interviewer-administered questionnaire, physical examination, biochemical measurements and electrocardiography.
<b>Data content</b>	Prevalence of 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.
<b>Frequency</b>	Conducted in 1992 and 1998.
<b>Availability of data</b>	Survey report (upon request).
<b>Contact</b>	Dr. Chew Suok Kai Epidemiology and Disease Control Division Ministry of Health College of Medicine Building 16 College Road Singapore 169854 FAX: (65) 224 1677

## Singapore

<b>Title</b>	Survey of Primary Medical Care in Singapore
<b>Responsible agency or ministry</b>	Health Information Management Branch, Biostatistics and Research Branch, Ministry of Health.
<b>Objective</b>	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.
<b>Scope</b>	All 1,480 private general practitioners and all doctors working in the government primary health care clinics. A total of 27,000 patients were covered during the survey.
<b>Collection method</b>	Doctor- and nurse-administered questionnaire.
<b>Data content</b>	Diagnosis or medical complaints, employment status, type of housing, residential status, and other demographic characteristics. Profile of GP Practices.
<b>Frequency</b>	Triennial beginning in 2001.
<b>Availability of data</b>	Statistical report on survey findings.
<b>Contact</b>	Dr. Chew Suok Kai Epidemiology and Disease Control Division Ministry of Health College of Medicine Building 16 College Road Singapore 169854 FAX: (65) 224 1677  Mr. Khoo Chow Huat Health-Information Management Branch InfoComm Division Ministry of Health College of Medicine Building 16, College Road Singapore 169854 FAX: (65) 224 1677



## Singapore

<b>Title</b>	National Health Surveillance System
<b>Responsible agency or ministry</b>	Epidemiology and Disease Control Division Ministry of Health
<b>Objective</b>	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.
<b>Scope</b>	Multistage sample of 6,000 Singapore residents aged 18 and above.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Core questionnaire—smoking habits, alcohol consumption, self-reported height and weight, weight control, dietary practices, and demographic and socioeconomic characteristics. Supplementary questionnaire—utilization of primary health care facilities.
<b>Frequency</b>	Conducted in 2001.
<b>Availability of data</b>	Statistical tabulations and highlights of survey findings (on request).
<b>Contact</b>	Dr. Chew Suok Kai Epidemiology and Disease Control Division Ministry of Health College of Medicine Building 16 College Road Singapore 169854 FAX: (65) 224 1677

## Singapore

<b>Title</b>	Survey on Cigarette Smoking Among Singaporeans
<b>Responsible agency or ministry</b>	Epidemiology and Disease Control Division Ministry of Health
<b>Objective</b>	As smoking is an important risk factor to 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.
<b>Scope</b>	Multistage sample of 5,000 Singapore residents 18–64 years of age.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Frequency, duration, age at onset of smoking, reasons for picking up the smoking habit, whether any intention to quit smoking, nonsmoker's impression of a smoker, harmful effects of smoking, and other demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1995.
<b>Availability of data</b>	Survey highlights and tabulations (upon request).
<b>Contact</b>	Dr. Chew Suok Kai Epidemiology and Disease Control Division Ministry of Health College of Medicine Building 16 College Road Singapore 169854 FAX: (65) 224 1677

## Singapore

<b>Title</b>	National Survey of Senior Citizens
<b>Responsible agency or ministry</b>	Jointly conducted by Ministry of Health, Ministry of Community Development, and Department of Statistics
<b>Objective</b>	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.
<b>Scope</b>	Multistage sample of 6,000 persons aged 55 years and over living in households.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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 career.
<b>Frequency</b>	Conducted in 1983 and 1995.
<b>Availability of data</b>	Survey highlights and tabulations (upon request).
<b>Contact</b>	Mr. Khoo Chow Huat Health Information Management Branch InfoComm Division Ministry of Health College of Medicine Building 16 College Road Singapore 169854 FAX: (65) 224 1677

## Spain

<b>Title</b>	Survey on Disabilities, Impairments, and State of Health
<b>Responsible agency or ministry</b>	National Institute of Statistics
<b>Objective</b>	To estimate the total number of people suffering from any disability, and to know the nature of the impairment that originated the disability.
<b>Scope</b>	Sample survey of 79,000 households covering about 220,000 persons of the noninstitutionalized population of Spain.
<b>Collection method</b>	Interviewer-administered questionnaires.
<b>Data content</b>	Disabilities; severity, evolutionary prognosis, and date of onset of disabilities; technical aids and personal assistance requested (received and not); impairments; cause of duration of impairments; rehabilitation received; use of health and social services and frequency of use; monetary subsidies and/or fiscal benefits; body changes as a result of suffering from a disability; changes in employment; occupation; search for employment; level of education (completed or in progress); and educational integration.
<b>Frequency</b>	Conducted in 1999.
<b>Availability of data</b>	Data files, statistical tables, and publications of survey findings.
<b>Contact</b>	Benita Aybar López Instituto Nacional de Estadística Subdirección de Estadística Paseo de la Castellana, 183 28071, Madrid Spain Phone: (34) (91) 583 9100 FAX: (34) (91) 583 9158 E-mail: info@ine.es

## Spain

<b>Title</b>	National Health Survey
<b>Responsible agency or ministry</b>	Ministry of Health and Consumption
<b>Objective</b>	Summary data about the characteristics and distribution of perceived morbidity, certain habits of life in relation to health, and utilization of the health care services of the noninstitutionalized population of Spain.
<b>Scope</b>	Sample survey of 76,000 persons of the noninstitutionalized population who were 1 year of age and over.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Self-perceived health status, incidence of acute illness, prevalence of chronic diseases, limitation of activities for acute and 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.
<b>Frequency</b>	Conducted in 1987, 1993, 1997, and 2001.
<b>Availability of data</b>	Data files and statistical report.
<b>Contact</b>	Margarita García Instituto Nacional de Estadística Subdirección General de Difusión Estadística Paseo de la Castellana 18328071 Madrid Spain Phone: (34) (91) 583 9100 FAX: (34) (91) 583 9158 E-mail: info@ine.es

## Sweden

<b>Title</b>	Survey of Living Conditions
<b>Responsible agency or ministry</b>	Statistics Sweden
<b>Objective</b>	To provide national data on living conditions of the population of Sweden 16–84 years of age.
<b>Scope</b>	Random sample of 7,000 persons per year 16–84 years of age, drawn from the Register of the Total Swedish Population.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	<p>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.</p> <p>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.</p> <p>Supplementary component—every second year in an 8-year cycle; one, two, or three main components are expanded.</p>
<b>Frequency</b>	Annual since 1975.
<b>Availability of data</b>	<p>Statistical reports presenting analyses based on the survey findings.</p> <p>Statistical services on commission.</p>
<b>Contact</b>	<p>Uno Davidsson  Statistics Sweden  BV/SU  S-115 81  Stockholm, Sweden  Phone: (46) (8) 783 4000  FAX: (46) (8) 783 4005  E-mail: uno.davidsson@scb.se</p>

## Switzerland

<b>Title</b>	Trend Survey on Health Behavior and Alcohol Consumption in Switzerland
<b>Responsible agency or ministry</b>	Swiss Institute for the Prevention of Alcohol and Other Drug Problems
<b>Objective</b>	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.
<b>Scope</b>	Multistage probability or quota sample of between 1,500 and 3,000 persons 15 years of age and over, representative for Switzerland, with oversampling of the two smaller language regions.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	Fixed core data component—consumption questions and some key health behavior. Supplementary component—varies from survey to survey.
<b>Frequency</b>	Conducted in 1975, 1981, and 1987.
<b>Availability of data</b>	Reports and data files upon request (charges may apply).
<b>Contact</b>	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) 321 2911 FAX: (41) (21) 321 2940

## Switzerland

<b>Title</b>	Swiss Health Survey (SOMIPOPS)
<b>Responsible agency or ministry</b>	Institute for Social and Preventive Medicine
<b>Objective</b>	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.
<b>Scope</b>	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 over were interviewed.
<b>Collection method</b>	Interviewer-administered questionnaire and self-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1981–82.
<b>Availability of data</b>	Tabulated data upon request.
<b>Contact</b>	Professor F. Gutzwiller, Ph.D. Institute for Social and Preventive Medicine Sumatarstr. 30 CH 8006 Zurich, Switzerland Phone: (41) (1) 634 4617 FAX: (41) (1) 634 4986



## Switzerland

<b>Title</b>	Health Behavior of School-Age Children in Switzerland
<b>Responsible agency or ministry</b>	Swiss Institute for the Prevention of Alcohol and Other Drug Problems
<b>Objective</b>	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).
<b>Scope</b>	Multistage probability sample of the classes by cantons of Switzerland, with over sampling in certain cantons; overall about 16,000 pupils between 11 and 16 years of age were interviewed in 1994.
<b>Collection method</b>	Questionnaire distributed during class.
<b>Data content</b>	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.
<b>Frequency</b>	Every 4 years between 1986 and 1994.
<b>Availability of data</b>	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.
<b>Contact</b>	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) 321 2911 FAX: (41) (21) 321 2940

## Switzerland

<b>Title</b>	Swiss Health Promotion Survey
<b>Responsible agency or ministry</b>	Swiss Federal Statistical Office
<b>Objective</b>	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.
<b>Scope</b>	Multistage probability sample of 5 cantons of Switzerland. The sample included 2,111 persons aged 20–74 years, with an oversampling of persons 65–74 years of age.
<b>Collection method</b>	Telephone interview and written questionnaire.
<b>Data content</b>	Health status, chronic conditions, mental health and psychological well-being, dietary habits, physical exercise, knowledge of health and disease, tranquilizer consumption, social interaction, and demographic and socioeconomic characteristics.
<b>Frequency</b>	Conducted in 1989.
<b>Availability of data</b>	Statistical reports presenting the survey findings (in French only). Tabulated data upon request.
<b>Contact</b>	Swiss Federal Statistical Office Division of Population and Employment Health Section Espace de l'Europe 10 CH-2010 Neuenburg, Switzerland Phone: (41) (32) 713 6564 FAX: (41) (32) 713 6382

## Switzerland

<b>Title</b>	Swiss Health Survey
<b>Responsible agency or ministry</b>	Swiss Federal Statistical Office
<b>Objective</b>	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 preventive health measures.
<b>Scope</b>	Resident population of 16,000 households of persons 15 years of age and over.
<b>Collection method</b>	Telephone interview and written questionnaire and interviewer-administered questionnaire to persons 75 years of age and over.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1992, 1997, and 2002.
<b>Availability of data</b>	Statistical reports (1992 and 1997), tabulated data upon request.
<b>Contact</b>	Dr. Roland Calmonte Swiss Federal Statistical Office Division of Population and Employment Health Section Espace de l'Europe 10 CH-2010 Neuenburg, Switzerland Phone: (41) (32) 713 65 64 FAX: (41) (32) 713 63 82 E-mail: gesundheit@bfs.admin.ch

## Ukraine

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

<b>Title</b>	General Household Survey	
<b>Responsible agency or ministry</b>	Office for National Statistics (ONS)	
<b>Objective</b>	To examine relationships between the main variables with which social policy is concerned, and to monitor changes in these associations over time.	
<b>Scope</b>	Sample of approximately 8,000 households covering about 15,000 persons per year. General population resident in private (noninstitutional) households in England, Scotland, and Wales 16 years of age and over, 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.	
<b>Collection method</b>	Computer-assisted personal interviewing (CAPI).	
<b>Data content</b>	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, physical activity, leisure time activity, daily living activity), demographic, and socioeconomic characteristics.	
<b>Frequency</b>	Continuous 1971–96. Survey suspended for 1997 and 1999. Reinstated 1998. Annual since 2000.	
<b>Availability of data</b>	Data tapes and an annual report. Unpublished data is also available.	
<b>Contact</b>	<u>Published and unpublished data</u> Alison Walker Office of National Statistics (ONS) GHS Unit, D1/19 1 Drummond Gate London SW1V 2QQ, United Kingdom Phone: (44) (171) 533 5303 FAX: (44) (171) 533 5300 E-mail: alison.walker@ons.gov.uk	<u>Data tapes</u> ESRC Data Archive University of Essex Wivenhoe Park, Colchester Essex CO4 3SQ, United Kingdom Phone: (44) (1206) 87 2001 FAX: (44) (1206) 87 2003 E-mail: archive@essex.ac.uk

## United Kingdom

<b>Title</b>	Health Survey for England	
<b>Responsible agency or ministry</b>	Department of Health	
<b>Objective</b>	To provide annual data about health, to estimate the proportion of people with health conditions, and to examine relationships between the main variables with which health is associated. To monitor changes over time.	
<b>Scope</b>	Sample of approximately 11,000 households covering about 20,000 people per year covering the general population living in private households in England 2 years of age and over. Children aged 13–15 years were interviewed in person with the consent of the child's parent or guardian. In the case of children aged 2–12 years the parent or guardian answered on behalf of the child.	
<b>Collection method</b>	Computer-assisted personal interviewing (CAMPI).	
<b>Data content</b>	Health conditions, risk factors associated with those conditions such as smoking, drinking, blood samples, height and weight, blood pressure measurements, and demographic and socioeconomic characteristics. The main focus varies from year to year and has covered cardiovascular disease, respiratory and other conditions, accidents, disability, special measures of general health, children, and physical activity.	
<b>Frequency</b>	Continuous since 1991.	
<b>Availability of data</b>	Annual report and archived data.	
<b>Contact</b>	<u>Published and unpublished data</u> Mr. Patrick Tucker Department of Health Statistics Division 3S Skipton House 80 London Road London SE1 6LH, United Kingdom Phone: (44) (0) 20 7972 5718 FAX: (44) (0) 20 7972 5662 E-mail: patrick.tucker@doh.gsi.gov.uk	<u>Archived data</u> ESRC Data Archive University of Essex Wivenhoe Park, Colchester Essex CO4 3SQ, United Kingdom Phone: (44) (1206) 87 2001 FAX: (44) (1206) 87 2003 E-mail: essex.archive@mailbox.ac.uk

## United Kingdom

<b>Title</b>	Scottish Health Survey	
<b>Responsible agency or ministry</b>	Scottish Executive Health Department	
<b>Objective</b>	To provide national data on the health of the Scottish population.	
<b>Scope</b>	Approximately 13,000 people in the 2–74 age group living in private households in Scotland in the 1998 survey.	
<b>Collection method</b>	Interviewer-administered questionnaire followed by a nurse visit.	
<b>Data content</b>	<p>Interviewers phase—general health topics, long-standing illness and acute illness, cardiovascular diseases (CVD) and related conditions (history, diagnosis, and treatment), family history of CVD, use of health services (particularly in relation to CVD), physical activity and exercise, body measurements (height and weight), eating habits, smoking and drinking, recent accidents, dental health, psychosocial factors, respiratory diseases, incontinence, and demographic and socioeconomic characteristics.</p> <p>Nurses visit—collected information about prescribed medicines and recent experience of food poisoning and gastroenteritis. They measured blood pressure, lung function, and waist and hip circumferences, and also requested a small blood sample.</p>	
<b>Frequency</b>	Triennial since 1995.	
<b>Availability of data</b>	Report presenting the survey findings (charges apply)—also available on the Internet. Summary document of key findings available (free of charge). Archived data.	
<b>Contact</b>	<u>Published data</u> Ms. Anne Corbett Scottish Executive Health Department St. Andrew's House Edinburgh Scotland EH1 3DG, United Kingdom Phone: (44) (131) 244 2603 FAX: (44) (131) 244 2051 E-mail: anne.corbett@scotland.gsi.gov.uk	<u>Archived data</u> ESRC Data Archive University of Essex Wivenhoe Park, Colchester Essex CO4 3SQ, United Kingdom Phone: (44) (1206) 87 2001 FAX: (44) (1206) 87 2003 E-mail: archive@essex.ac.uk

## United States

<b>Title</b>	National Health Interview Survey (NHIS)
<b>Responsible agency or ministry</b>	National Center for Health Statistics Centers for Disease Control and Prevention U.S. Department of Health and Human Services
<b>Objective</b>	To provide national data on the health, illness, and disability status of the civilian noninstitutionalized population of the United States.
<b>Scope</b>	Multistage probability sample of 40,000 households covering about 100,000 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.
<b>Collection method</b>	Interviewer-administered questionnaire.
<b>Data content</b>	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.
<b>Frequency</b>	Continuous since 1957.
<b>Availability of data</b>	Public-use data files, CD-ROMS, and statistical reports presenting the survey findings (charges apply).
<b>Contact</b>	Jane Gentleman, Ph.D. Division of Health Interview Statistics National Center for Health Statistics 3311 Toledo Road, Room 2218 Hyattsville, Maryland 20782 Phone: 1-301-458-4257 FAX: 1-301-438-4035 E-mail: BZG5@cdc.gov



## United States

<b>Title</b>	National Health and Nutrition Examination Survey (NHANES)
<b>Responsible agency or ministry</b>	National Center for Health Statistics Centers for Disease Control and Prevention U.S. Department of Health and Human Services
<b>Objective</b>	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.
<b>Scope</b>	Multistage probability sample of persons in the civilian noninstitutionalized population. (Sample size: 5,000 persons per year)
<b>Collection method</b>	Interviewer-administered questionnaire, physician examination, and laboratory tests.
<b>Data content</b>	Medical history, mental health and cognitive functioning, blood and urine tests, dental and medical examinations. The diseases, medical conditions, and health indicators studied include cardiovascular disease, diabetes and lower extremity disease, environmental exposures, equilibrium, hearing loss, infectious diseases and immunization, kidney disease, nutrition, obesity, osteoporosis, physical fitness and functioning, reproductive history and sexual behavior, respiratory disease, sexually transmitted diseases, skin diseases, and vision.
<b>Frequency</b>	Conducted in 1971–74, 1974–75, 1976–80, and 1988–94. Beginning in 1999, annual sample and continuous survey.
<b>Availability of data</b>	Public-use data files and statistical reports presenting the survey findings (charges apply).
<b>Contact</b>	Clifford L. Johnson Division of Health Examination Surveys National Center for Health Statistics 3311 Toledo Road, Room 4205 Hyattsville, Maryland 20782 Phone: 1–301–458–4292 FAX: 1–301–458–4028 E-mail: CLJ1@cdc.gov

## United States

<b>Title</b>	National Hispanic Health and Nutrition Examination Survey (HHANES)
<b>Responsible agency or ministry</b>	National Center for Health Statistics Centers for Disease Control and Prevention U.S. Department of Health and Human Services
<b>Objective</b>	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.
<b>Scope</b>	Nationwide probability sample of defined population of 16,000 persons, aged 6 months–74 years. Civilian noninstitutionalized population.
<b>Collection method</b>	Interviewer-administered questionnaire, physician examination, and laboratory tests.
<b>Data content</b>	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.
<b>Frequency</b>	Conducted in 1982–84.
<b>Availability of data</b>	Public-use data files and statistical reports presenting the findings (charges apply).
<b>Contact</b>	Clifford L. Johnson Division of Health Examination Surveys National Center for Health Statistics 3311 Toledo Road, Room 4205 Hyattsville, Maryland 20782 Phone: 1–301–458–4292 FAX: 1–301–458–4028 E-mail: CLJ1@cdc.gov

## United States

<b>Title</b>	National Survey of Family Growth (NSFG)
<b>Responsible agency or ministry</b>	National Center for Health Statistics Centers for Disease Control and Prevention U.S. Department of Health and Human Services
<b>Objective</b>	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.
<b>Scope</b>	Probability sample of households covering women of childbearing age (15–44 years) in the selected sample; 10,847 women were in the 1995 survey. The 2002 survey (Cycle 6) will include both men and women aged 15–44 years.
<b>Collection method</b>	All Cycles of the NSFG have used in-person interviews with female interviewers. Recent Cycles have included a self-administered portion for the most sensitive questionnaire items. Beginning in Cycle 5 (1995), the survey has been conducted using laptop computers and computer-assisted personal interviewing (CAPI) software. The self-administered portion has been conducted using Audio Computer-Assisted Self-Interviewing (ACASI).
<b>Data content</b>	Live births and births expected, low birthweight, miscarriages and stillbirths, adoption, contraception and sterilization, infertility, prenatal care, breastfeeding, teenage sexual activity and pregnancy, unmarried cohabitation, marriage, divorce, and use of family planning services.
<b>Frequency</b>	Conducted in 1973, 1976, 1982, 1988, 1995, and 2002.
<b>Availability of data</b>	Public-use data files and statistical reports presenting survey findings (charges apply).
<b>Contact</b>	William Mosher, Ph.D. Reproductive Statistics Branch Division of Vital Statistics National Center for Health Statistics 3311 Toledo Road, Room 7421 Hyattsville, Maryland 20782 Phone: 1–301–458–4385 FAX: 1–301–458–4033 E-mail: WDM1@cdc.gov

## United States

<b>Title</b>	National Health and Nutrition Examination Survey I — Epidemiologic Follow-up Study (NHEFS)
<b>Responsible agency or ministry</b>	National Center for Health Statistics Centers for Disease Control and Prevention U.S. Department of Health and Human Services
<b>Objective</b>	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.
<b>Scope</b>	The NHEFS is a series of follow-up 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 follow-up 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.
<b>Collection method</b>	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 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.
<b>Data content</b>	Medical conditions, hospitalization and institutionalization, functional status, vision and hearing problems, 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.
<b>Frequency</b>	Conducted in 1982–84, 1986, 1987, and 1992.
<b>Availability of data</b>	Public-use data files and statistical reports presenting the study findings (charges apply).
<b>Contact</b>	Ms. Christine Cox Office of Analysis, Epidemiology, and Health Promotion National Center for Health Statistics 3311 Toledo Road, Room 6425 Hyattsville, Maryland 20782 Phone: 1–301–458–4164 FAX: 1–301–458–4036 E-mail: CSC3@cdc.gov

## United States

<b>Title</b>	The Longitudinal Studies of Aging: The Longitudinal Study of Aging (LSOA) and The Second Longitudinal Study of Aging (LSOA II)
<b>Responsible agency or ministry</b>	National Center for Health Statistics Centers for Disease Control and Prevention U.S. Department of Health and Human Services
<b>Objective</b>	The Longitudinal Studies of Aging is a multicohort study designed to measure changes in health status, health-related behaviors and health care, and the causes and consequences of these changes within and across two cohorts of elderly Americans. A second objective of the study is to provide a mechanism for monitoring how the health status of the elderly and their patterns of health care utilization are affected by proposed changes in Medicare and Medicaid and the accelerating shift toward managed care.
<b>Scope</b>	Sampling frames developed from persons who were 70 years of age and over when they participated in the National Health Interview Survey. The sample included 7,527 persons at baseline in 1984 in LSOA, 9,447 persons at baseline in 1994 in LSOA II.
<b>Collection method</b>	Personal interviews at baseline. Computer-assisted telephone interview (CATI) and mail questionnaires at follow-up interviews.
<b>Data content</b>	Living arrangements and change, physical limitations and change, conditions and risk factors, use of medical care, hospitalizations, insurance coverage, social interactions, and demographic and socioeconomic characteristics. Records of survey participants are matched against computerized files of information on hospitalization and death. This information was added to that of the interviews.
<b>Frequency</b>	LSOA—conducted in 1984, 1986, 1988, and 1990. LSOA II—conducted in 1994–95, 1997–98, and 1999–2000.
<b>Availability of data</b>	Public-use data files and statistical reports presenting the survey findings (charges apply).
<b>Contact</b>	Julie Dawson Weeks Office of Analysis, Epidemiology, and Health Promotion National Center for Health Statistics 3311 Toledo Road, Room 6416 Hyattsville, Maryland 20782 Phone: 1–301–458–4562 FAX: 1–301–458–4038 E-mail: jad3@cdc.gov

# General Topics Covered in Health Surveys by Country



Topic	AUSTRALIA							
	Australian Health Survey	Children's Immunization and Health Screening Survey	National Health Survey	Survey of Disability, Aging, and Carers	Time Use Survey	National Aboriginal and Torres Strait Islander Survey	National Nutrition Survey	Survey of Mental Health and Well-being
<b>Demographic and socioeconomic characteristics</b>								
Age	X	X	X	X	X	X	X	X
Date of birth								X
Sex	X	X	X	X	X	X	X	X
Race			X			X	X	
Ethnicity							X	
Nationality or country of birth	X	X	X	X	X	X	X	X
Marital status	X		X	X	X	X	X	X
Household composition	X	X	X	X	X	X	X	X
Education	X		X	X	X	X	X	X
Employment status	X	X	X	X	X	X	X	X
Occupation or industry	X		X	X	X		X	X
Environmental work conditions								
Income	X	X	X	X	X	X	X	
Military status								
<b>Health status</b>								
Chronic conditions	X			X		X	X	X
Disability				X	X	X		X
Handicaps or impairments	X			X	X	X		
Limitation of activities			X	X	X	X	X	X
Acute conditions	X		X				X	X
Accidents or injuries	X		X				X	X
Bed-days	X		X				X	
Work or school loss	X		X	X			X	X
Restricted activity	X		X	X			X	X
Mental health or well-being	X		X	X			X	X
Body measurements (height and weight)			X			X	X	
Health status (self-assessed)			X			X	X	X

Topic	AUSTRALIA							
	Australian Health Survey	Children's Immunization and Health Screening Survey	National Health Survey	Survey of Disability, Aging, and Carers	Time Use Survey	National Aboriginal and Torres Strait Islander Survey	National Nutrition Survey	Survey of Mental Health and Well-being
<b>Health care utilization</b>								
Hospitalizations	X		X			X	X	X
Medical consultations	X		X			X	X	X
Dental consultations	X	X	X				X	
Outpatient or clinic visits	X		X			X	X	
Physical examinations or checkups	X	X						
Immunizations	X	X						
Maternal and child health care	X							
Medicine consumption	X		X				X	X
Transportation or distance to health care						X		
<b>Lifestyle, risk factors</b>								
Alcohol consumption			X			X	X	X
Smoking habits			X			X	X	X
Drug or narcotic usage								X
Dietary behavior					X	X	X	
Health habits					X			
Physical activity			X	X	X		X	
Leisure time activity					X			
Family planning			X				X	
AIDS knowledge, attitudes, and behavior								
Activities of daily living (ADL)				X	X			
Instrumental activities of daily living (IADL)				X	X			
Social interaction				X	X			
Environmental living conditions				X	X		X	
<b>Health expenses</b>								
Health expenditures								
Health insurance coverage	X		X				X	
<b>Mortality</b>								
Infant mortality								



Topic	AUSTRIA			
	Special Sport, Home, and Leisure Accident Survey	Special Smoking Habits Survey	Special Health Survey	Special Impairment, Disability, and Handicap Survey
<b>Demographic and socioeconomic characteristics</b>				
Age	X	X	X	X
Date of birth	X	X	X	X
Sex	X	X	X	X
Race				
Ethnicity				
Nationality or country of birth	X	X	X	X
Marital status	X	X	X	X
Household composition	X	X	X	X
Education	X	X	X	X
Employment status	X	X	X	X
Occupation or industry	X	X	X	X
Environmental work conditions		X		
Income				
Military status				
<b>Health status</b>				
Chronic conditions		X	X	X
Disability			X	X
Handicaps or impairments			X	X
Limitation of activities				X
Acute conditions			X	
Accidents or injuries	X			X
Bed-days				
Work or school loss	X			
Restricted activity	X		X	X
Mental health or well-being				
Body measurements (height and weight)			X	
Health status (self-assessed)			X	

Topic	AUSTRIA			
	Special Sport, Home, and Leisure Accident Survey	Special Smoking Habits Survey	Special Health Survey	Special Impairment, Disability, and Handicap Survey
<b>Health care utilization</b>				
Hospitalizations	X		X	
Medical consultations	X		X	
Dental consultations			X	
Outpatient or clinic visits	X		X	
Physical examinations or checkups			X	
Immunizations			X	
Maternal and child health care				
Medicine consumption			X	
Transportation or distance to health care				
<b>Lifestyle, risk factors</b>				
Alcohol consumption				
Smoking habits		X	X	
Drug or narcotic usage				
Dietary behavior				
Health habits			X	
Physical activity	X		X	
Leisure time activity	X			
Family planning				
AIDS knowledge, attitudes, and behavior				
Activities of daily living (ADL)			X	X
Instrumental activities of daily living (IADL)				
Social interaction				
Environmental living conditions				X
<b>Health expenses</b>				
Health expenditures				
Health insurance coverage				
<b>Mortality</b>				
Infant mortality				

Topic	CANADA							
	Canada Health Survey	Canada Fitness Survey	Canadian Health and Disability Survey	Participation and Activity Limitation Survey, 2001	Canadian Tobacco Monitoring Survey (CTUMS)	Canadian Community Health Survey	Aboriginal Peoples Survey	National Population Health Survey
<b>Demographic and socioeconomic characteristics</b>								
Age	X	X	X	X	X	X	X	X
Date of birth	X			X	X	X	X	X
Sex	X	X	X	X	X	X	X	X
Race	X				X	X		
Ethnicity					X	X	X	X
Nationality or country of birth	X				X	X	X	X
Marital status	X	X	X			X	X	X
Household composition	X		X	X				X
Education	X	X	X	X		X	X	X
Employment status	X	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	X	X	X
Military status								
<b>Health status</b>								
Chronic conditions	X		X	X		X	X	X
Disability	X		X	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	
Accidents or injuries	X					X		X
Bed-days	X							X
Work or school loss	X					X		
Restricted activity	X					X		X
Mental health or well-being	X	X				X	X	X
Body measurements (height and weight)	X	X				X	X	X
Health status (self-assessed)	X	X				X	X	X

Topic	CANADA							
	Canada Health Survey	Canada Fitness Survey	Canadian Health and Disability Survey	Participation and Activity Limitation Survey, 2001	Canadian Tobacco Monitoring Survey (CTUMS)	Canadian Community Health Survey	Aboriginal Peoples Survey	National Population Health Survey
<b>Health care utilization</b>								
Hospitalizations	X							X
Medical consultations	X						X	X
Dental consultations	X					X	X	X
Outpatient or clinic visits								X
Physical examinations or checkups						X	X	X
Immunizations	X							X
Maternal and child health care								
Medicine consumption	X			X				X
Transportation or distance to health care								X
<b>Lifestyle, risk factors</b>								
Alcohol consumption	X	X		X		X	X	X
Smoking habits	X	X		X	X	X	X	X
Drug or narcotic usage						X		
Dietary behavior			X	X		X	X	X
Health habits								X
Physical activity	X	X		X		X	X	X
Leisure time activity	X	X		X		X	X	X
Family planning								
AIDS knowledge, attitudes, and behavior								
Activities of daily living (ADL)			X	X			X	X
Instrumental activities of daily living (IADL)				X				X
Social interaction							X	X
Environmental living conditions							X	
<b>Health expenses</b>								
Health expenditures				X				
Health insurance coverage						X	X	X
<b>Mortality</b>								
Infant mortality								

Topic	CHINA, People's Republic of		CZECH REPUBLIC		
	National Sample Survey on the Situation of Children	Health Services Household Interview Survey of China	Survey of Treated Morbidity	Reproductive Health Survey	Health Interview Survey
<b>Demographic and socioeconomic characteristics</b>					
Age	X		X	X	X
Date of birth	X	X		X	
Sex	X	X	X	X	X
Race					
Ethnicity				X	
Nationality or country of birth	X			X	X
Marital status	X	X		X	X
Household composition	X				
Education	X	X		X	X
Employment status	X	X	X		X
Occupation or industry	X	X	X		X
Environmental work conditions					
Income		X		X	X
Military status					
<b>Health status</b>					
Chronic conditions		X	X		X
Disability		X	X		X
Handicaps or impairments		X	X		X
Limitation of activities		X	X		X
Acute conditions		X	X		X
Accidents or injuries			X		
Bed-days		X			X
Work or school loss		X	X		
Restricted activity		X	X		X
Mental health or well-being					
Body measurements (height and weight)	X				X
Health status (self-assessed)	X				X

Topic	CHINA, People's Republic of		CZECH REPUBLIC		
	National Sample Survey on the Situation of Children	Health Services Household Interview Survey of China	Survey of Treated Morbidity	Reproductive Health Survey	Health Interview Survey
<b>Health care utilization</b>					
Hospitalizations	X	X	X	X	
Medical consultations			X	X	
Dental consultations					
Outpatient or clinic visits		X		X	
Physical examinations or checkups					
Immunizations		X			
Maternal and child health care	X	X		X	
Medicine consumption		X	X		
Transportation or distance to health care		X			
<b>Lifestyle, risk factors</b>					
Alcohol consumption		X		X	X
Smoking habits		X		X	X
Drug or narcotic usage				X	
Dietary behavior				X	X
Health habits				X	
Physical activity		X			X
Leisure time activity					X
Family planning				X	
AIDS knowledge, attitudes, and behavior				X	
Activities of daily living (ADL)					
Instrumental activities of daily living (IADL)					
Social interaction					X
Environmental living conditions	X				X
<b>Health expenses</b>					
Health expenditures		X			X
Health insurance coverage		X			X
<b>Mortality</b>					
Infant mortality	X				

Topic	DENMARK		ESTONIA		FINLAND			
	The Danish Health and Morbidity Survey	Population Survey on Prevention of Musculoskeletal Disorders	Living Conditions Survey	National Health Interview Survey	The Finnish National Health Survey	Mini-Finland Health Survey	Finrisk-97 Senior Survey	The Health 2000 Examination Survey
<b>Demographic and socioeconomic characteristics</b>								
Age	X	X	X	X	X			X
Date of birth	X	X			X			X
Sex	X	X	X	X	X	X	X	X
Race								
Ethnicity								
Nationality or country of birth	X	X	X					
Marital status	X	X	X	X	X	X	X	
Household composition	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	X	X	X			X		
Income	X	X	X	X	X	X	X	
Military status					X			
<b>Health status</b>								
Chronic conditions	X	X	X	X	X	X	X	
Disability	X	X	X	X	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		X		X		
Bed-days			X	X	X			
Work or school loss	X		X	X	X	X	X	
Restricted activity	X	X	X	X		X		
Mental health or well-being	X		X	X		X		X
Body measurements (height and weight)	X			X	X	X	X	X
Health status (self-assessed)	X	X		X		X		X

Topic	DENMARK		ESTONIA		FINLAND			
	The Danish Health and Morbidity Survey	Population Survey on Prevention of Musculoskeletal Disorders	Living Conditions Survey	National Health Interview Survey	The Finnish National Health Survey	Mini-Finland Health Survey	Finrisk-97 Senior Survey	The Health 2000 Examination Survey
<b>Health care utilization</b>								
Hospitalizations	X	X		X	X	X	X	
Medical consultations	X	X	X	X	X	X	X	
Dental consultations	X		X	X	X	X	X	
Outpatient or clinic visits	X	X	X	X	X	X	X	
Physical examinations or checkups	X				X	X	X	
Immunizations								
Maternal and child health care								
Medicine consumption	X	X		X	X	X	X	
Transportation or distance to health care						X		
<b>Lifestyle, risk factors</b>								
Alcohol consumption	X		X	X		X		X
Smoking habits	X		X	X	X	X	X	X
Drug or narcotic usage	X		X					
Dietary behavior	X			X		X		
Health habits	X	X		X				
Physical activity	X	X		X		X		
Leisure time activity						X		
Family planning				X		X		
AIDS knowledge, attitudes, and behavior				X				
Activities of daily living (ADL)	X				X	X	X	
Instrumental activities of daily living (IADL)					X	X	X	
Social interaction	X	X	X	X				
Environmental living conditions	X		X					
<b>Health expenses</b>								
Health expenditures					X			
Health insurance coverage			X	X	X			
<b>Mortality</b>								
Infant mortality								



Topic	FRANCE			GERMANY		HUNGARY		
	French Health Survey	National Inpatients Survey	Health and Social Protection Survey	Questions on Health—Microcensus Supplementary Survey	National Health Examination and Interview Survey	Health Interview Survey	Health Behavior Survey	National Health Interview Survey
<b>Demographic and socioeconomic characteristics</b>								
Age	X	X	X	X	X	X	X	X
Date of birth	X	X	X	X	X		X	X
Sex	X	X	X	X	X	X	X	X
Race								
Ethnicity								X
Nationality or country of birth	X	X	X	X	X			
Marital status	X	X	X	X	X	X	X	X
Household composition	X		X	X	X	X		X
Education	X	X	X	X	X	X	X	X
Employment status	X	X	X	X	X	X	X	X
Occupation or industry	X			X	X	X		X
Environmental work conditions	X		X			X		
Income	X		X	X	X			X
Military status								
<b>Health status</b>								
Chronic conditions	X	X	X	X	X	X	X	X
Disability	X	X	X	X	X	X		X
Handicaps or impairments	X	X	X		X	X	X	X
Limitation of activities	X	X	X		X	X		X
Acute conditions	X	X	X	X				
Accidents or injuries		X		X	X	X		X
Bed-days	X	X	X				X	X
Work or school loss	X	X			X			X
Restricted activity	X	X	X		X			X
Mental health or well-being		X	X					X
Body measurements (height and weight)	X		X	X	X	X	X	X
Health status (self-assessed)	X		X		X	X	X	X

Topic	FRANCE			GERMANY		HUNGARY		
	French Health Survey	National Inpatients Survey	Health and Social Protection Survey	Questions on Health—Microcensus Supplementary Survey	National Health Examination and Interview Survey	Health Interview Survey	Health Behavior Survey	National Health Interview Survey
<b>Health care utilization</b>								
Hospitalizations	X	X	X	X	X	X	X	X
Medical consultations	X	X	X	X	X	X	X	X
Dental consultations	X	X	X		X	X	X	X
Outpatient or clinic visits	X	X	X	X		X		
Physical examinations or checkups	X	X	X		X		X	X
Immunizations				X	X			
Maternal and child health care	X	X	X					
Medicine consumption	X	X	X		X	X		X
Transportation or distance to health care	X	X	X					
<b>Lifestyle, risk factors</b>								
Alcohol consumption	X	X			X		X	X
Smoking habits	X	X	X	X	X	X	X	X
Drug or narcotic usage					X			
Dietary behavior	X	X	X		X	X	X	X
Health habits					X			X
Physical activity		X			X	X	X	X
Leisure time activity								
Family planning			X					X
AIDS knowledge, attitudes, and behavior								
Activities of daily living (ADL)			X			X		
Instrumental activities of daily living (IADL)			X			X		
Social interaction								X
Environmental living conditions					X	X		X
<b>Health expenses</b>								
Health expenditures	X	X	X					X
Health insurance coverage	X	X	X	X	X			
<b>Mortality</b>								
Infant mortality								

Topic	ICELAND			IRELAND	ISRAEL		ITALY
	Survey of Living Conditions in Iceland	Multi-Purpose Survey	Health and Living Conditions	National Health and Lifestyle Surveys	Health Services Survey	Survey of the Elderly	Survey of Health Conditions of the Population and the Use of Health Services
<b>Demographic and socioeconomic characteristics</b>							
Age	X	X	X	X	X	X	X
Date of birth	X		X		X	X	X
Sex	X	X			X	X	X
Race							
Ethnicity					X	X	
Nationality or country of birth					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	X
Occupation or industry	X		X		X	X	X
Environmental work conditions	X		X				
Income	X	X	X			X	X
Military status					X		
<b>Health status</b>							
Chronic conditions	X		X		X	X	X
Disability	X		X		X	X	X
Handicaps or impairments	X		X			X	X
Limitation of activities	X		X		X	X	X
Acute conditions			X				X
Accidents or injuries	X	X	X				X
Bed-days			X				X
Work or school loss			X		X		X
Restricted activity	X		X			X	X
Mental health or well-being		X	X				
Body measurements (height and weight)			X				X
Health status (self-assessed)			X			X	X

Topic	ICELAND			IRELAND	ISRAEL		ITALY
	Survey of Living Conditions in Iceland	Multi-Purpose Survey	Health and Living Conditions	National Health and Lifestyle Surveys	Health Services Survey	Survey of the Elderly	Survey of Health Conditions of the Population and the Use of Health Services
<b>Health care utilization</b>							
Hospitalizations			X		X	X	X
Medical consultations			X		X	X	X
Dental consultations			X		X	X	X
Outpatient or clinic visits			X		X	X	X
Physical examinations or checkups			X				X
Immunizations							
Maternal and child health care							
Medicine consumption	X		X			X	X
Transportation or distance to health care			X				
<b>Lifestyle, risk factors</b>							
Alcohol consumption		X	X	X		X	
Smoking habits		X	X	X	X	X	X
Drug or narcotic usage							X
Dietary behavior		X	X	X			
Health habits		X	X	X			
Physical activity		X	X	X		X	X
Leisure time activity	X					X	
Family planning		X					
AIDS knowledge, attitudes, and behavior							
Activities of daily living (ADL)			X		X	X	X
Instrumental activities of daily living (IADL)						X	
Social interaction	X		X			X	
Environmental living conditions						X	
<b>Health expenses</b>							
Health expenditures			X		X		
Health insurance coverage					X		X
<b>Mortality</b>							
Infant mortality							

Topic	JAPAN	KOREA, Republic of			
	Comprehensive Survey of Living Conditions of People on Health and Welfare	Patients Survey	National Nutrition Survey	Social Statistics Survey	National Health Interview Survey
<b>Demographic and socioeconomic characteristics</b>					
Age	X	X	X	X	X
Date of birth	X				
Sex	X	X	X	X	X
Race					
Ethnicity					
Nationality or country of birth					
Marital status	X		X		X
Household composition	X				
Education		X	X		X
Employment status	X	X	X		
Occupation or industry		X	X		
Environmental work conditions					
Income	X	X			
Military status					
<b>Health status</b>					
Chronic conditions	X	X	X	X	X
Disability					
Handicaps or impairments			X		
Limitation of activities	X				
Acute conditions	X	X			X
Accidents or injuries	X	X	X	X	
Bed-days	X	X	X	X	
Work or school loss					
Restricted activity	X				X
Mental health or well-being	X				
Body measurements (height and weight)		X			
Health status (self-assessed)	X		X		X

Topic	JAPAN	KOREA, Republic of			
	Comprehensive Survey of Living Conditions of People on Health and Welfare	Patients Survey	National Nutrition Survey	Social Statistics Survey	National Health Interview Survey
<b>Health care utilization</b>					
Hospitalizations	X	X	X	X	X
Medical consultations	X	X		X	X
Dental consultations	X			X	X
Outpatient or clinic visits	X	X		X	
Physical examinations or checkups	X				
Immunizations					
Maternal and child health care					
Medicine consumption					
Transportation or distance to health care					X
<b>Lifestyle, risk factors</b>					
Alcohol consumption			X		
Smoking habits			X		
Drug or narcotic usage					
Dietary behavior		X			
Health habits	X		X		
Physical activity		X			
Leisure time activity			X		
Family planning					
AIDS knowledge, attitudes, and behavior					
Activities of daily living (ADL)	X	X			
Instrumental activities of daily living (IADL)					
Social interaction					
Environmental living conditions					
<b>Health expenses</b>					
Health expenditures					X
Health insurance coverage	X				X
<b>Mortality</b>					
Infant mortality					

Topic	LATVIA			
	Epidemiologic Research on Most Common Noninfectious Diseases	Living Conditions Survey	Survey of Population About Health Care System	Health Behavior Among Latvian Adult Population
<b>Demographic and socioeconomic characteristics</b>				
Age	X	X	X	X
Date of birth	X	X		
Sex	X	X	X	X
Race				
Ethnicity				
Nationality or country of birth	X	X		
Marital status	X	X		X
Household composition		X		
Education	X	X	X	X
Employment status	X	X		X
Occupation or industry	X	X	X	
Environmental work conditions		X		
Income			X	X
Military status				
<b>Health status</b>				
Chronic conditions	X			
Disability	X			
Handicaps or impairments		X		
Limitation of activities		X		
Acute conditions		X		
Accidents or injuries				
Bed-days				
Work or school loss	X			
Restricted activity				
Mental health or well-being				
Body measurements (height and weight)	X			
Health status (self-assessed)	X			X

Topic	LATVIA			
	Epidemiologic Research on Most Common Noninfectious Diseases	Living Conditions Survey	Survey of Population About Health Care System	Health Behavior Among Latvian Adult Population
<b>Health care utilization</b>				
Hospitalizations		X		
Medical consultations		X		
Dental consultations		X		
Outpatient or clinic visits		X		
Physical examinations or checkups			X	
Immunizations				
Maternal and child health care				
Medicine consumption				
Transportation or distance to health care		X	X	
<b>Lifestyle, risk factors</b>				
Alcohol consumption	X	X	X	X
Smoking habits	X	X	X	X
Drug or narcotic usage		X		
Dietary behavior	X		X	X
Health habits				
Physical activity	X	X	X	X
Leisure time activity				
Family planning				
AIDS knowledge, attitudes, and behavior				
Activities of daily living (ADL)				
Instrumental activities of daily living (IADL)				
Social interaction				
Environmental living conditions		X		
<b>Health expenses</b>				
Health expenditures			X	
Health insurance coverage			X	
<b>Mortality</b>				
Infant mortality				



Topic	NETHERLANDS				NEW ZEALAND		NORWAY		
	Permanent Survey on Living Conditions	Quality of Life Survey	National Health Interview Survey	National Health Interview Survey of Turkish Inhabitants in the Netherlands	National Nutrition Survey	New Zealand Health Survey	Level of Living: Health Conditions	Level of Living: Multi-purpose	Level of Living: Working Environment
<b>Demographic and socioeconomic characteristics</b>									
Age	X	X	X	X	X	X	X	X	X
Date of birth	X		X				X	X	X
Sex	X	X	X	X	X	X	X	X	X
Race						X			
Ethnicity	X		X	X	X	X			
Nationality or country of birth	X		X	X		X	X	X	X
Marital status	X	X	X	X	X	X	X	X	X
Household composition	X	X	X	X	X	X	X	X	X
Education	X	X	X	X	X	X	X	X	X
Employment status	X	X	X	X	X	X	X	X	X
Occupation or industry	X	X	X	X	X	X	X	X	X
Environmental work conditions	X	X						X	X
Income	X	X	X	X	X	X	X	X	X
Military status									
<b>Health status</b>									
Chronic conditions	X	X	X	X		X	X	X	
Disability	X	X	X	X		X	X	X	
Handicaps or impairments	X	X	X				X	X	
Limitation of activities	X		X	X		X	X	X	
Acute conditions	X		X	X			X		
Accidents or injuries	X		X			X	X		X
Bed-days	X		X	X			X		
Work or school loss							X		
Restricted activity	X	X	X	X		X	X		
Mental health or well-being	X	X	X	X		X	X	X	X
Body measurements (height and weight)	X		X	X	X	X	X		
Health status (self-assessed)	X	X	X	X		X	X		

Topic	NETHERLANDS				NEW ZEALAND		NORWAY		
	Permanent Survey on Living Conditions	Quality of Life Survey	National Health Interview Survey	National Health Interview Survey of Turkish Inhabitants in the Netherlands	National Nutrition Survey	New Zealand Health Survey	Level of Living: Health Conditions	Level of Living: Multi-purpose	Level of Living: Working Environment
<b>Health care utilization</b>									
Hospitalizations	X	X	X	X		X	X		
Medical consultations	X	X	X	X		X	X		X
Dental consultations	X	X	X	X		X			
Outpatient or clinic visits	X	X	X	X		X	X		
Physical examinations or checkups	X		X			X	X		
Immunizations	X		X						
Maternal and child health care	X		X	X		X	X		
Medicine consumption	X	X	X	X		X	X		
Transportation or distance to health care				X					
<b>Lifestyle, risk factors</b>									
Alcohol consumption	X	X	X	X	X	X	X	X	
Smoking habits	X	X	X	X		X	X		
Drug or narcotic usage	X								
Dietary behavior					X				
Health habits					X				
Physical activity	X	X	X			X	X	X	
Leisure time activity	X	X				X		X	
Family planning	X		X	X					
AIDS knowledge, attitudes, and behavior									
Activities of daily living (ADL)	X	X	X				X	X	
Instrumental activities of daily living (IADL)	X	X	X				X	X	
Social interaction	X	X					X	X	X
Environmental living conditions	X	X							
<b>Health expenses</b>									
Health expenditures									
Health insurance coverage	X	X	X	X		X			
<b>Mortality</b>									
Infant mortality									

Topic	POLAND						PORTUGAL
	Social Status of Households Survey	Family Health Survey	Sociodemographic and Health Determinants of Infant Mortality Survey	Health Care in Households Survey	Disabled on the Labor Market Survey	Health Interview Survey (POLHIS 96)	National Health Survey
<b>Demographic and socioeconomic characteristics</b>							
Age	X	X	X	X	X	X	X
Date of birth		X	X		X	X	X
Sex	X	X	X	X	X	X	X
Race							
Ethnicity							
Nationality or country of birth							
Marital status			X	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	X
Occupation or industry		X	X		X	X	X
Environmental work conditions							
Income				X		X	X
Military status							
<b>Health status</b>							
Chronic conditions	X	X	X	X		X	X
Disability	X	X		X	X	X	X
Handicaps or impairments		X			X	X	
Limitation of activities		X		X	X	X	X
Acute conditions							X
Accidents or injuries		X			X		
Bed-days						X	X
Work or school loss						X	
Restricted activity					X	X	X
Mental health or well-being						X	
Body measurements (height and weight)			X			X	X
Health status (self-assessed)	X	X	X	X	X	X	X

Topic	POLAND						PORTUGAL
	Social Status of Households Survey	Family Health Survey	Sociodemographic and Health Determinants of Infant Mortality Survey	Health Care in Households Survey	Disabled on the Labor Market Survey	Health Interview Survey (POLHIS 96)	National Health Survey
<b>Health care utilization</b>							
Hospitalizations		X	X	X		X	
Medical consultations			X	X		X	X
Dental consultations				X		X	X
Outpatient or clinic visits				X		X	X
Physical examinations or checkups							
Immunizations							
Maternal and child health care							X
Medicine consumption						X	
Transportation or distance to health care							
<b>Lifestyle, risk factors</b>							
Alcohol consumption			X			X	X
Smoking habits		X	X			X	X
Drug or narcotic usage							
Dietary behavior							
Health habits							
Physical activity	X	X	X				X
Leisure time activity						X	X
Family planning			X			X	
AIDS knowledge, attitudes, and behavior							
Activities of daily living (ADL)							X
Instrumental activities of daily living (IADL)							
Social interaction							
Environmental living conditions			X		X		
<b>Health expenses</b>							
Health expenditures				X			X
Health insurance coverage				X		X	
<b>Mortality</b>							
Infant mortality			X				

Topic	SINGAPORE					SPAIN	
	National Health Survey	Survey of Primary Medical Care in Singapore	National Health Surveillance System	Survey on Cigarette Smoking Among Singaporeans	National Survey of Senior Citizens	Survey on Disabilities, Impairments, and State of Health	National Health Survey
<b>Demographic and socioeconomic characteristics</b>							
Age		X	X	X		X	X
Date of birth	X				X		
Sex	X	X	X	X	X	X	X
Race	X	X	X	X	X		
Ethnicity	X	X	X	X	X		
Nationality or country of birth							
Marital status	X		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	X
Occupation or industry	X	X	X		X	X	X
Environmental work conditions							
Income			X		X	X	X
Military status							
<b>Health status</b>							
Chronic conditions	X	X			X	X	X
Disability					X	X	
Handicaps or impairments					X	X	X
Limitation of activities					X	X	X
Acute conditions		X				X	X
Accidents or injuries							X
Bed-days						X	X
Work or school loss							
Restricted activity					X	X	X
Mental health or well-being					X	X	
Body measurements (height and weight)	X		X				X
Health status (self-assessed)			X		X	X	X

Topic	SINGAPORE					SPAIN	
	National Health Survey	Survey of Primary Medical Care in Singapore	National Health Surveillance System	Survey on Cigarette Smoking Among Singaporeans	National Survey of Senior Citizens	Survey on Disabilities, Impairments, and State of Health	National Health Survey
<b>Health care utilization</b>							
Hospitalizations					X	X	X
Medical consultations		X	X		X	X	X
Dental consultations						X	X
Outpatient or clinic visits		X	X		X	X	X
Physical examinations or checkups	X	X					
Immunizations		X					X
Maternal and child health care		X					
Medicine consumption	X				X	X	X
Transportation or distance to health care					X		X
<b>Lifestyle, risk factors</b>							
Alcohol consumption	X		X			X	X
Smoking habits	X		X	X		X	X
Drug or narcotic usage						X	
Dietary behavior	X		X			X	X
Health habits	X					X	X
Physical activity	X		X			X	X
Leisure time activity			X				
Family planning							
AIDS knowledge, attitudes, and behavior							
Activities of daily living (ADL)					X	X	
Instrumental activities of daily living (IADL)					X	X	
Social interaction					X		
Environmental living conditions							
<b>Health expenses</b>							
Health expenditures					X		
Health insurance coverage			X		X		
<b>Mortality</b>							
Infant mortality							

Topic	SWEDEN	SWITZERLAND				
	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
<b>Demographic and socioeconomic characteristics</b>						
Age	X	X	X	X	X	X
Date of birth	X	X	X	X	X	X
Sex	X	X	X	X	X	X
Race						
Ethnicity	X					
Nationality or country of birth	X	X	X	X	X	X
Marital status	X	X	X		X	X
Household composition	X		X	X	X	X
Education	X	X	X	X	X	X
Employment status	X	X	X	X	X	X
Occupation or industry	X	X	X	X	X	X
Environmental work conditions	X	X	X	X	X	X
Income	X	X	X			X
Military status						
<b>Health status</b>						
Chronic conditions	X	X	X	X	X	X
Disability	X		X		X	X
Handicaps or impairments	X			X	X	X
Limitation of activities	X		X		X	X
Acute conditions			X		X	X
Accidents or injuries		X	X	X		X
Bed-days		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		X	X	X	X	X
Body measurements (height and weight)	X		X	X	X	X
Health status (self-assessed)	X	X	X	X	X	X

Topic	SWEDEN	SWITZERLAND				
	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
<b>Health care utilization</b>						
Hospitalizations	X		X	X	X	X
Medical consultations	X	X	X	X	X	X
Dental consultations	X		X	X		X
Outpatient or clinic visits	X		X	X		X
Physical examinations or checkups	X		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			
<b>Lifestyle, risk factors</b>						
Alcohol consumption	X	X	X	X	X	X
Smoking habits	X	X	X	X	X	X
Drug or narcotic usage		X		X		X
Dietary behavior		X		X	X	X
Health habits		X		X	X	X
Physical activity	X	X		X	X	X
Leisure time activity	X	X	X	X	X	X
Family planning					X	X
AIDS knowledge, attitudes, and behavior				X	X	
Activities of daily living (ADL)	X		X	X		X
Instrumental activities of daily living (IADL)	X		X			X
Social interaction	X		X		X	X
Environmental living conditions	X	X	X		X	X
<b>Health expenses</b>						
Health expenditures				X		
Health insurance coverage			X			X
<b>Mortality</b>						
Infant mortality						



Topic	UKRAINE	UNITED KINGDOM		
	National Health Survey	General Household Survey	Health Survey for England	Scottish Health Survey
<b>Demographic and socioeconomic characteristics</b>				
Age	X	X	X	X
Date of birth		X	X	X
Sex	X	X	X	X
Race		X	X	X
Ethnicity		X	X	X
Nationality or country of birth	X	X	X	X
Marital status		X	X	X
Household composition		X	X	X
Education	X	X	X	X
Employment status	X	X	X	X
Occupation or industry	X	X	X	X
Environmental work conditions				
Income		X	X	X
Military status				
<b>Health status</b>				
Chronic conditions	X	X	X	X
Disability	X	X	X	
Handicaps or impairments	X	X	X	
Limitation of activities		X	X	X
Acute conditions	X	X	X	X
Accidents or injuries	X		X	X
Bed-days	X			
Work or school loss				
Restricted activity		X	X	
Mental health or well-being	X		X	X
Body measurements (height and weight)	X		X	X
Health status (self-assessed)		X	X	X

Topic	UKRAINE	UNITED KINGDOM		
	National Health Survey	General Household Survey	Health Survey for England	Scottish Health Survey
<b>Health care utilization</b>				
Hospitalizations	X	X	X	X
Medical consultations	X	X	X	X
Dental consultations				X
Outpatient or clinic visits	X	X	X	X
Physical examinations or checkups	X		X	
Immunizations	X			
Maternal and child health care				
Medicine consumption			X	X
Transportation or distance to health care				
<b>Lifestyle, risk factors</b>				
Alcohol consumption		X	X	X
Smoking habits		X	X	X
Drug or narcotic usage				
Dietary behavior			X	X
Health habits				
Physical activity			X	X
Leisure time activity			X	X
Family planning		X	X	
AIDS knowledge, attitudes, and behavior				
Activities of daily living (ADL)			X	
Instrumental activities of daily living (IADL)				
Social interaction				
Environmental living conditions				
<b>Health expenses</b>				
Health expenditures	X			
Health insurance coverage		X		
<b>Mortality</b>				
Infant mortality	X			

Topic	UNITED STATES					
	National Health Interview Survey (NHIS)	National Health and Nutrition Examination Survey (NHANES)	National Hispanic Health and Nutrition Examination Survey (HHANES)	National Survey of Family Growth (NSFG)	National Health and Nutrition Examination Survey I—Epidemiologic Follow-up Study (NHEFS)	Longitudinal Studies of Aging (LSOA and LSOA II)
<b>Demographic and socioeconomic characteristics</b>						
Age	X	X	X	X	X	X
Date of birth	X	X	X	X	X	X
Sex	X	X	X	X	X	X
Race	X	X	X	X	X	X
Ethnicity	X	X	X	X	X	X
Nationality or country of birth	X			X	X	X
Marital status	X	X	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	X	X	X	X	X	X
Environmental work conditions						
Income	X	X	X	X	X	X
Military status	X					X
<b>Health status</b>						
Chronic conditions	X	X	X	X	X	X
Disability	X	X	X		X	X
Handicaps or impairments	X	X	X		X	X
Limitation of activities	X	X	X		X	X
Acute conditions	X	X	X	X	X	
Accidents or injuries	X	X				X
Bed-days	X	X				
Work or school loss	X	X				
Restricted activity	X	X				X
Mental health or well-being	X	X	X			X
Body measurements (height and weight)	X	X	X		X	X
Health status (self-assessed)	X	X	X		X	X

Topic	UNITED STATES					
	National Health Interview Survey (NHIS)	National Health and Nutrition Examination Survey (NHANES)	National Hispanic Health and Nutrition Examination Survey (HHANES)	National Survey of Family Growth (NSFG)	National Health and Nutrition Examination Survey I—Epidemiologic Follow-up Study (NHEFS)	Longitudinal Studies of Aging (LSOA and LSOA II)
<b>Health care utilization</b>						
Hospitalizations	X		X	X	X	X
Medical consultations	X		X	X	X	X
Dental consultations	X	X	X		X	
Outpatient or clinic visits	X		X	X		X
Physical examinations or checkups	X		X	X	X	X
Immunizations	X	X	X			X
Maternal and child health care	X	X		X		
Medicine consumption		X	X			
Transportation or distance to health care						
<b>Lifestyle, risk factors</b>						
Alcohol consumption	X	X	X		X	X
Smoking habits	X	X	X	X	X	X
Drug or narcotic usage	X	X	X			
Dietary behavior	X	X	X		X	X
Health habits	X				X	X
Physical activity	X	X			X	X
Leisure time activity						X
Family planning			X	X		
AIDS knowledge, attitudes, and behavior	X			X		
Activities of daily living (ADL)	X	X			X	X
Instrumental activities of daily living (IADL)	X	X				X
Social interaction	X	X			X	X
Environmental living conditions	X		X			
<b>Health expenses</b>						
Health expenditures						X
Health insurance coverage	X	X	X	X	X	X
<b>Mortality</b>						
Infant mortality				X		

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**NOTE:** Agencies and contact persons for survey statistics are listed under each specific survey in the “Profile” section of this publication.



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