HOSPITAL UTILIZATION AND ACCESS TO CARE - HUQ
Target Group: SPs Birth +

HUQ.010 {First/Next} I have some general questions about {your/SP's} health.

Would you say {your/SP's} health in general is . . .

CAPI INSTRUCTION:
DISPLAY "FIRST" IF SP AGE IS >= 16 YEARS.

excellent,	1	
very good,	2	
good,	3	
fair, or	4	
poor?	5	
REFUSED	7	
DON'T KNOW	9	

BOX 1

CHECK ITEM HUQ.015:
IF SP AGE >= 1, CONTINUE.
OTHERWISE, GO TO HUQ.030.

HUQ.020 Compared with **12 months ago**, would you say {your/SP's} health is now . . .

better,	1	
worse, or	2	
about the same?	3	
REFUSED	7	
DON'T KNOW	9	

HUQ.030 Is there a place that {you/SP} **usually** {go/goes} when {you are/he/she is} sick or {you/s/he} need{s} advice about {your/his/her} health?

CAPI INSTRUCTION:
IF SP AGE < 12, DISPLAY "YOU" IN THE FOURTH DISPLAY AND DON'T DISPLAY THE "S" IN THE FIFTH DISPLAY.

YES	1	
THERE IS **NO** PLACE	2	(HUQ.050)
THERE IS **MORE THAN ONE** PLACE	3	
REFUSED	7	(HUQ.050)
DON'T KNOW	9	(HUQ.050)

HUQ.040 What kind of place {do you/does SP} go to most often: is it a clinic, doctor's office, emergency room, or some other place?

CLINIC OR HEALTH CENTER	1	
DOCTOR'S OFFICE OR HMO	2	
HOSPITAL EMERGENCY ROOM	3	
HOSPITAL OUTPATIENT DEPARTMENT	4	
SOME OTHER PLACE	5	
REFUSED	7	
DON'T KNOW	9	

HUQ.050 {During the **past 12 months**, how/How} many times {have you/has SP} seen a doctor or other health care professional about {your/his/her} health at a doctor's office, a clinic, hospital emergency room, at home or some other place? **Do not include** times {you were/s/he was} hospitalized overnight.

CAPI INSTRUCTION:
DISPLAY "12 MONTHS" ONLY IF SP'S AGE IS >= 1.

NONE	0	
1	1	(HUQ.071)
2 TO 3	2	(HUQ.071)
4 TO 9	3	(HUQ.071)
10 TO 12	4	(HUQ.071)
13 OR MORE	5	(HUQ.071)
REFUSED	7	(HUQ.071)
DON'T KNOW	9	(HUQ.071)

HUQ.060 About how long has it been since {you/SP} **last** saw or talked to a doctor or other health care professional about {your/his/her} health? **Include** doctors seen while {you were} {he/she was} a patient in a hospital. Has it been . . .

6 months or less,	1
more than 6 months, but not more than 1 year ago,	2
more than 1 year, but not more than 3 years ago,	3
more than 3 years, or	4
never?	5
REFUSED	7
DON'T KNOW	9

HUQ.071 {During the **past 12 months**, were you/{Was/was} SP} a patient in a hospital **overnight**? Do not include an overnight stay in the emergency room.

CAPI INSTRUCTION:
DISPLAY "12 MONTHS" ONLY IF SP'S AGE IS >= 1.
DISPLAY "WAS SP" WITH LEADING CAPS, IF SP'S AGE IS <1.

YES	1	
NO	2	(BOX 2)
REFUSED	7	(BOX 2)
DON'T KNOW	9	(BOX 2)

HUQ.080 How many different times did {you/SP} stay in any hospital overnight or longer {during the **past 12 months**}?

CAPI INSTRUCTION:
DISPLAY "12 MONTHS" ONLY IF SP'S AGE IS >= 1.
HARD EDIT: 1-366.

|___|___|___|
ENTER NUMBER

REFUSED 77777
DON'T KNOW 99999

BOX 1A

OMITTED

BOX 2

CHECK ITEM 085:
IF SP AGE >= 4, CONTINUE.
OTHERWISE, GO TO END OF SECTION.

HUQ.090 During the **past 12 months**, that is since {DISPLAY CURRENT MONTH} of {DISPLAY LAST YEAR}, {have you/has SP} seen or talked to a mental health professional such as a psychologist, psychiatrist, psychiatric nurse or clinical social worker about {your/his/her} health?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9