

Health Barometer 2010

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Editorial Sheet

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Ministry of Health, Social Policy and Equality

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Health Barometer 2010



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Presentation

The Health Barometer is an opinion study which, since 1995, is conducted by the Ministry of Health, Social Policy and Equality by means of a cooperation agreement with the Sociological Research Centre [CIS].

With the Health Barometer the Ministry of Health, Social Policy and Equality tries to know the perception citizens have of the public health care services; the opinion health care policy means which is developed deserve for them as well as the real penetration of the informative campaigns. It also allows obtaining information on the knowledge degree and attitudes of the citizens faced with specific health problems, in addition to the monitoring of the evolution through the time of all of these aspects.

The Health Barometer is integrated on the National Statistical Plan, the main instrument which orders the statistical activity for State purposes conducted by the National Statistics Institute, for which is guaranteed that the Spanish Administration, The European Union, the Institutions and the users are provided with the necessary statistical information for the monitoring and evaluation of the applied policies.

Therefore this is a useful tool of continuous improvement, by which it's possible to know the degree of acceptance or rejection that citizens manifest about health care services, which are theirs and for them, this point must contribute to legitimize (satisfaction) or delegitimize (dissatisfaction) the actions which, in terms of health policy decisions, are adopted from the different levels of responsibility.

In each edition 7800 personal interviews are made, divided into 3 sub-samples or waves, to people of both sexes aged 18 or over living in all the autonomous regions.

Each sub-sample or wave is nationally representative, and their results reflect the situation in the country at the time that interviews are conducted. The Barometer as a whole, namely, the aggregation of the 3 sub-samples, reflects the average situation in the period in Spain, and is a nationally representative sample with a sampling error of $\pm 1.2\%$ for a confidence level of 95,5%.

Interviews are held in homes, in order to minimize or eliminate the slant that can enter the fact of holding the surveys in health centers. It also allows knowing the opinion citizens have about public health services, regardless of the fact they have used them or not, since the study is aimed at the general population.

Mercedes ALFARO LATORRE
Health Information Institute
Director

Introduction

In this paper we analyze and discuss the marginal results for the Health Barometer of the year 2010.

On the website of the Ministry of Health, Social Policy and Equality are placed these results by age, sex, educational level and employment status of respondents, by size of municipalities where they live and by autonomous region.

<http://www.mspsi.gob.es/en/estadEstudios/estadisticas/sisInfSanSNS/informeAnual.htm>

The Ministry of Health, Social Policy and Equality invites the organizations, institutions and researchers to employ the information stored in the Health Barometer as a material for the development of their researches and studies.

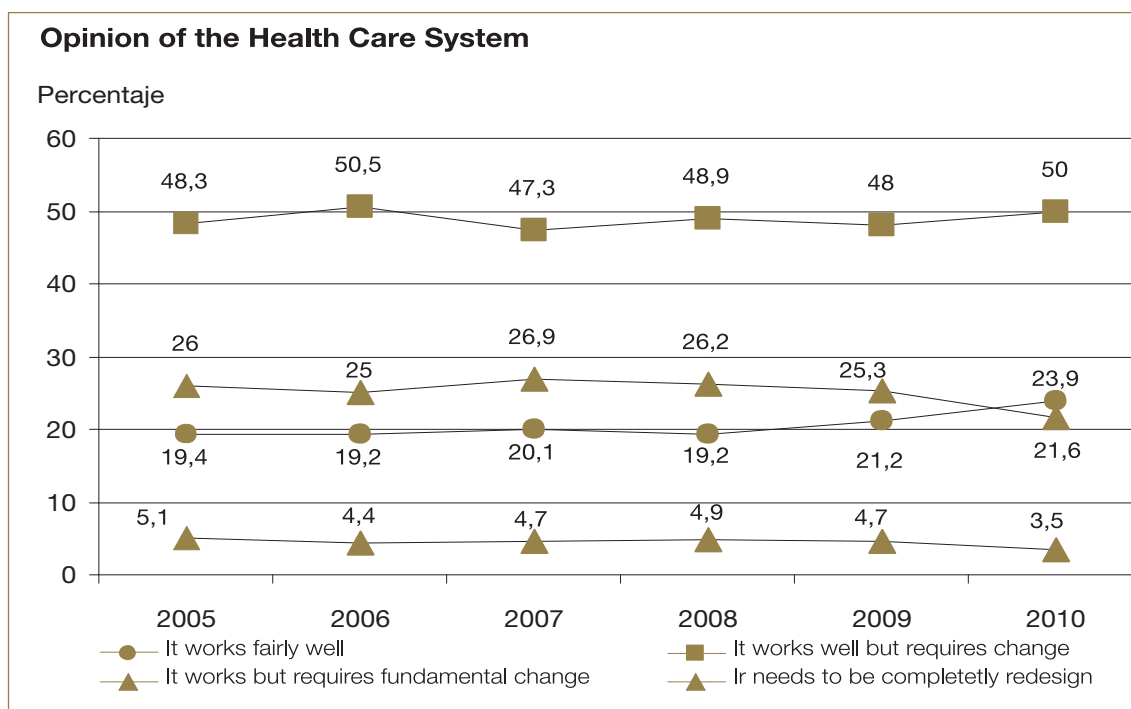
Download of microdata files and technical documents of the Health Barometer since 1996 until 2010: <http://www.mspsi.gob.es/en/estadEstudios/estadisticas/BarometroSanitario/home.htm>

1. Operation of the Health Care System

In the year 2010 edition of the Health Barometer, a survey taken by the Ministry of Health, Social Policy and Equality, with the cooperation of the Sociological Research Centre (CIS), the results obtained show that the people have a favourable opinion of the running of the Spanish Health Care System, because more than 7 out of every 10 people (73.9%) believe that it works fairly well or well (though it requires some change).

The trend in the percentage of people who believe that the system works well (with some change needed) must be pointed out, because in 2010 this figure was the highest it has been since 2005. Moreover, for the first time in this edition of the Barometer, the percentage of people who believe that the system works fairly well is greater than that of those who state that, though the system works, fundamental changes should be made.

Last of all, both the percentage of people who believe that fundamental change is necessary (21.6%) and those who state that they are unhappy and want the system to be redesigned completely (3.5%) are the lowest in the last 6 years.



The people's opinion regarding the proper running of the health care system increased by 6 percentage points from 2005 to 2010, and by the same amount their negative opinion of its operation has decreased.

| <i>"It works fairly well + It works well but requires change"</i> | | | | | |
|--------------------------------------------------------------------------------|------|------|------|------|------|
| 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| 67.7 | 69.7 | 67.4 | 68.1 | 69.2 | 73.9 |
| <i>"It requires fundamental change + It needs to be completely redesigned"</i> | | | | | |
| 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| 31.1 | 29.4 | 31.6 | 31.1 | 30 | 25.1 |

| <i>Of the following statements, which best expresses your opinion about the Health Care System in our country?</i> | | | | | | |
|--------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| In general, the health care system works fairly well | 19.4 | 19.2 | 20.1 | 19.2 | 21.2 | 23.9 |
| The health care system works well, but certain change is needed | 48.3 | 50.5 | 47.3 | 48.9 | 48 | 50 |
| The health care system requires fundamental change, but certain things work properly | 26 | 25 | 26.9 | 26.2 | 25.3 | 21.6 |
| Our health care system is so bad that it should be completely redesigned | 5.1 | 4.4 | 4.7 | 4.9 | 4.7 | 3.5 |
| Does not know or no response | 1.2 | 0.9 | 1.1 | 0.8 | 0.8 | 1 |

Women and men have different assessments of how the Health Care System works. The percentage of men who believe that *it works fairly well* is higher than that of women who state that they have the same opinion. On the contrary, women are more critical, because the percentage of them who say that *though certain things work well, fundamental change is necessary*, is 4 points higher than that of the men with the same opinion.

| 2010 | Total | Women | Men |
|--------------------------------------------------------------------------------------|-------|-------|------|
| In general, the Health Care System works fairly well | 23.9 | 21.9 | 25.9 |
| The Health Care System works well, but certain change is needed | 50 | 50.7 | 49.3 |
| The Health Care System requires fundamental change, but certain things work properly | 21.6 | 22.6 | 20.6 |
| Our health care system is so bad that it should be completely redesigned | 3.5 | 3.7 | 3.3 |
| Does not know or no response | 1 | 1.2 | 0.8 |

Using a scale of 1 (which would mean *very unsatisfied*) to 10 (*very satisfied*), the degree or level of satisfaction with the way in which the Public Health Care System works in Spain is scored at 6.57 points, which is the highest score given over the period undergoing comparison. Though in a very slow manner, the trend towards an increase of the people's satisfaction with the operation of the public health care system over this six-year time period is clear.

| <i>"In general, are you satisfied or unsatisfied with the way in which the public health care system works in Spain?"</i> | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Average | 6.1 | 6.23 | 6.27 | 6.29 | 6.35 | 6.57 |

Unlike the differing opinions which are expressed by women and men about the running of the health care system, as mentioned in the preceding paragraph, satisfaction measured using this scale is identical amongst men (6.57) and women (6.57).

In order to gain better knowledge of the assessment made by the people about how the public health care services work, in this year 2010 edition the Health Barometer includes a new question, which explores their satisfaction with those services.

| <i>"In your experience or according to the idea you have, evaluate the following health care services."</i> | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------|
| In responding, use a scale of 1 to 10, in which 1 means that it seems <i>"totally unsatisfactory"</i> to you and 10 means that it seems <i>"totally satisfactory"</i> to you. | | |
| | Percentage of survey-takers who answered the question | Average score |
| Primary care (family doctor and paediatrician appointments at health centres) | 97.4 | 7.06 |
| Specialist care (appointments with specialists at public centres) | 93.2 | 6.65 |
| Emergency care at public hospitals | 93.5 | 5.96 |
| Admittance and care at public hospitals | 90.7 | 6.70 |

In their own personal experience or due to the knowledge which they possess, the people have a positive assessment of public health care services, scoring them with a B or a C+ in terms of their satisfaction with (or the running) of those services. These particular results on satisfaction at the different "levels" of health care confirm the overall opinion expressed about the operation of the public health care system, to which reference is made in the preceding paragraph.

2. Health Care Coverage

The examination of health care coverage provides a set of results which may be nearly identical to those that were found in 2009.

Compared with the preceding year, the percentage of people who state that they have no right to health care fell by half to 0.4 percent.

| <i>Through which of the following are you entitled to health care?</i> | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|
| | 2009 | 2010 |
| The public health care system | 92 | 92 |
| A mutual insurance company (MUFACE, MUGEJU, ISFAS) in which you or the policy holder has chosen to be given care through the Public health care system | 3 | 2.7 |
| A mutual insurance company (MUFACE, MUGEJU, ISFAS) in which you or the policy holder has chosen to be given care by a Private health care company | 3.9 | 4.5 |
| I am not entitled to health care through any of the above | 0.8 | 0.4 |
| Does not know or no response | 0.3 | 0.4 |

3. Evaluation of Health Care

3.1 Choosing public or private service

If it were possible for them to choose the type of centre, public or private, at which they would like to receive care, the majority of the people prefer public health care centres for the various types of health care.

6 out of every 10 people surveyed would choose public centres for family doctor and paediatrician visits in primary care, for hospital admittance and for care due to emergencies. Amongst these 3 options, the percentage of people who prefer public centres is from 1.8 to 2 times greater than those who would opt for private centres. And for visits to specialists, if able to choose, though there is a smaller difference, the preferred choice is also a public centre (48%) before a private centre (42.9%).

"If you or some member of your household had to use a health care service, and you could choose which type, would you go to a public or private centre when requiring...?"

| | Public | | | Private | | | Both | | |
|----------------------------------------------------------------------|--------|------|------|---------|------|------|------|------|------|
| | 2008 | 2009 | 2010 | 2008 | 2009 | 2010 | 2008 | 2009 | 2010 |
| Primary care (family doctor and paediatrician appointments) | 62.9 | 62.8 | 63.9 | 31 | 31.3 | 29.8 | 5.6 | 5.5 | 5.8 |
| Specialist care (appointments with specialists, other than dentists) | 47.9 | 46.8 | 48 | 43.6 | 45.2 | 42.9 | 7.9 | 7.4 | 8.4 |
| Admittance into a hospital | 59 | 58.4 | 58.8 | 33.4 | 34.1 | 33.7 | 6.9 | 6.6 | 6.6 |
| Emergency care | 60.7 | 59.7 | 59.6 | 31.2 | 32.9 | 33 | 7.3 | 6.5 | 6.7 |

When asked what type of centre they would go to if the persons surveyed, or some member of their family, had a serious illness, the people also display a preference for public health care services. If they had the option, nearly 6 out of every 10 would choose the health care services in the public system, whereas 3 would opt for the private system; and 1 out of 10 would go to either.

If you or some member of your family had a serious illness and you could choose which type, would you go to a public health care service or a private one?

| | 2006 | 2007 | 2008 | 2009 | 2010 |
|----------------------------------|------|------|------|------|------|
| To a public health care service | 53.7 | 55.7 | 55.8 | 57.9 | 58.6 |
| To a private health care service | 35.1 | 34 | 33.1 | 31.5 | 30.1 |
| Either (indistinctly) (*) | 8.2 | 7.9 | 8.8 | 8.5 | 9.4 |
| Does not know | 2.5 | 2.1 | 2 | 1.8 | 1.6 |
| No response | 5 | 0.3 | 0.3 | 0.3 | 0.3 |

(*) This response is not provided by the survey-takers but is included when the interviewee gives it as a spontaneous response. de forma espontánea.

When the reason for being able to choose one type of health care service or the other, public or private, is specified in accordance with certain specific aspects, the results show that people also have a very well-defined opinion.

The following is a list of reasons why people might choose a public or a private health care service. *In your particular case, and always bearing in mind the hypothesis that you can choose, would you choose a public health care service or a private one, taking into account...?*

| 2010 | Public | Private | Both | Difference public-private |
|----------------------------------------------------|--------|---------|------|---------------------------|
| The technology and means which it possesses | 65.1 | 24.8 | 8.6 | 40.3 |
| The ability of the doctors | 58.1 | 20.9 | 19.6 | 37.2 |
| The ability of the nurses | 57.1 | 21 | 20.2 | 36.1 |
| The information you receive on your health problem | 46.3 | 34.6 | 17 | 11.7 |
| The personal treatment you receive | 41.6 | 42.3 | 14.4 | 0.7 |
| The comfort of the facilities | 35.8 | 54.6 | 8 | 18.8 |
| The speed with which you receive care | 30.3 | 63.9 | 4.5 | 33.6 |

The people state that they would choose the public health care system on the basis of the technology and means which it possesses at its health care centres (with a difference of 40.3 points over the private system), due to the abilities of its medical and nursing professionals (difference from 36 to 37 points) and the information which they receive on their health care problems (difference of 11.7 points).

On the other hand, they would choose the centres in the private health care system when it comes to the speed with which they receive care (a difference of 33.6 compared with choosing the public system) and the comfort of the facilities (a difference of 18.8 points). Last of all, if the choice is made based on the personal treatment received by the patients, the difference between the two systems is minimal, with 0.7 points in favour of the private system.

In all of its editions, the results show that, if able to choose, the people would select the public health care system because of *the technology and means which it possesses at its centres* and due to the *abilities of its professionals*, with differences over the private system of more than 30 points.

The people interviewed would choose to receive care in private services based on reasons of *the speed with which they are given care* and due to the (greater) *comfort of the facilities*, with differences over the public system that fluctuate from 18.8 to 47.6 points.

If able to choose the type of service, public or private, women display a greater preference for public services than men do when the selection is based on the technology available at centres, the abilities of doctors and nurses, and the information which they receive.

On the other hand, men in greater proportion than women would choose private services if the choice is based on reasons such as personal treatment, the comfort of the facilities or the speed with which care is received.

A series of reasons for which people might choose a public or private health care service are listed. *In your particular case, always in accordance with the hypothesis that you could choose, would you choose a public health care system or a private one when taking into account...?*

| 2010 | | Public | Private | Both | Difference between public-private |
|--------------------------------------------------------------------|-------|--------|---------|------|-----------------------------------|
| The technology and means which are available | Women | 66.3 | 23 | 9 | 43.3 |
| | Men | 63.8 | 26.7 | 8.2 | 37.1 |
| | Total | 65.1 | 24.8 | 8.6 | 40.3 |
| The abilities of the doctors | Women | 59.4 | 19.5 | 19.7 | 39.9 |
| | Men | 56.8 | 22.3 | 19.5 | 34.5 |
| | Total | 58.1 | 20.9 | 19.6 | 37.2 |
| The abilities of the nursing staff | Women | 58.6 | 19.4 | 20.2 | 39.2 |
| | Men | 55.6 | 22.6 | 20.2 | 33 |
| | Total | 57.1 | 21 | 20.2 | 36.1 |
| The information which you receive on your health care problem | Women | 47.9 | 33.5 | 16.6 | 14.4 |
| | Men | 44.6 | 35.8 | 17.5 | 8.8 |
| | Total | 46.3 | 34.6 | 17 | 11.7 |
| The personal treatment that you receive | Women | 43.1 | 40.1 | 15.2 | -3 |
| | Men | 40 | 44.7 | 13.7 | 4.7 |
| | Total | 41.6 | 42.3 | 14.4 | 0.7 |
| The comfort of the facilities | Women | 36.8 | 53.4 | 8.3 | 16.6 |
| | Men | 34.7 | 55.9 | 7.8 | 21.2 |
| | Total | 35.8 | 54.6 | 8 | 18.8 |
| The speed with which you receive care | Women | 30.6 | 63.5 | 4.6 | 32.9 |
| | Men | 29.9 | 64.3 | 4.4 | 34.4 |
| | Total | 30.3 | 63.9 | 4.5 | 33.6 |
| In all categories, the answer "No response" was 2 percent or less. | | | | | |

3.2. Primary Care

Of those surveyed, 71.5% state that in the 12 months prior to the survey, they had gone to a general practitioner (family doctor).

"In the last twelve months, have you had an appointment with a general practitioner?"

Not accompanied by a family member, friend, neighbour) We are, of course, referring to a real appointment, and not just asking for an appointment or having an X-ray or medical test completed.

| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|-------------------|------|------|------|------|------|------|
| Yes | 73 | 71.2 | 72.3 | 75 | 74.3 | 71.5 |
| No | 26.4 | 28.3 | 27.5 | 24.7 | 25.2 | 28.3 |
| Does not remember | 0.3 | 0.2 | 0.2 | 0.2 | 0.3 | 0.2 |
| No response | 0.2 | 0.3 | 0.1 | 0.1 | 0.2 | 0.1 |

In the series which is shown, one can see that in all years, with slight variations, 7 out of every 10 people have needed to make an appointment to visit their family doctor during the year immediately prior to taking this survey.

Women (76.6%) went to the family doctor more than men (66.1%).

Those who state that in the last 12 months prior to the survey they had requested care at a family doctor's office, they went to the public health care system an average of 4.20 times, and 0.34 times to the private health care system. Both frequencies are similar to those which were found in the preceding years.

| <i>And in these last twelve months, can you remember how many times you went to see a general practitioner [family doctor] in the public system? And how many times in the private system?</i> | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Average | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Public | 4.62 | 4.42 | (*) | 4.26 | 4.20 | 4.10 |
| Private | 0.40 | 0.41 | (*) | 0.42 | 0.41 | 0.34 |

(*) Due to an error, this question was not asked in the year 2007 edition of the Health Barometer.

In the 3 editions of the Barometer in which the speed or delay in giving an appointment for the same day when patients request to see a family doctor was asked about, the results show an unfavourable trend, because more than half of the people *never or nearly never* were provided with access to that appointment on the same day when they requested it: in 2008 the rate was 50.7%; in 2009 it was 55.2% and in 2010 it was 57.6%.

| <i>"When you ask for an appointment at your health care centre to go on the very same day, are you given an appointment for the same day...?"</i> | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|
| | 2008 | 2009 | 2010 |
| Always | 16.7 | 14.9 | 14.3 |
| Almost always | 28.6 | 25.8 | 27.3 |
| Almost never | 31.9 | 34.2 | 35.9 |
| Never | 18.8 | 21 | 21.7 |
| No Response | 4.1 | 4.1 | 0.8 |

To those who had *never or almost never* received an appointment for the same day on which they had requested it, they were given an appointment 3.58 days later (on average) than the date on which they requested the appointment.

For most people, the level of satisfaction with the care received at general practitioners' offices in the public health care system was high throughout all of the years which have been analyzed.

In 2010, 86.2 percent stated that this care *was very good or good*, with a satisfaction level that was nearly the same as in 2009 (86.1%) and greater than in the other years.

“In general, the care that you have received at your general practitioner’s (family doctor’s) visits in the public health care system has been ... ”

| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|---------------------------|------|------|------|------|------|------|
| Very good | 19.4 | 21.1 | (*) | 21.1 | 25.1 | 26.4 |
| Good | 64.8 | 61.7 | (*) | 63.8 | 61 | 59.8 |
| Fair | 12.5 | 14 | (*) | 12.2 | 11 | 11.1 |
| Poor | 2.2 | 1.7 | (*) | 1.5 | 1.7 | 2 |
| Very poor | 0.5 | 0.7 | (*) | 0.7 | 0.6 | 0.5 |
| Do not know – No response | 0.7 | 0.7 | (*) | 0.7 | 0.5 | 0.1 |

(*) Due to an error, this question was not asked in the year 2007 edition of the Health Barometer.

Of the people who had had such appointments, 24.7% state that they were given care that was *better or much better* than they had expected. For nearly 7 out of every 10 people (67.5%), the care was *more or less the same* as what they expected it to be.

“And in comparison with your expectations, this care was...”

| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|---------------------------|------|------|------|------|------|------|
| Much better | 2.9 | 3.4 | (*) | 4.1 | 4.4 | 3.3 |
| Better | 20.8 | 21.5 | (*) | 22.6 | 21.9 | 21.4 |
| More or less the same | 67.1 | 66.1 | (*) | 65.1 | 66.4 | 67.5 |
| Worse | 7.3 | 6.9 | (*) | 6.1 | 5.2 | 6.5 |
| Much worse | 0.7 | 0.6 | (*) | 0.9 | 0.7 | 0.8 |
| Do not know – No response | 1.2 | 1.6 | (*) | 1.2 | 1.4 | 0.2 |

(*) Due to an error, this question was not asked in the year 2007 edition of the Health Barometer.

The people surveyed were asked to evaluate 15 aspects or circumstances in public health care related with the care that is provided by general practitioners or paediatricians, in accordance with their own personal experience or the knowledge which they have of them.

The following table provides a breakdown of the assessments made by those surveyed.

The 3 aspects which those surveyed score highest are the proximity of the centres (7.85 out of 10), the confidence and assuredness conveyed by the doctor (7.54 out of 10) and the treatment received by the health care personnel (7.50 out of 10).

"In your experience or according to the idea you have, I would like you to evaluate the following aspects of the public health care system, referring to the care which is provided by general practitioners (family doctors) and paediatricians." In making this assessment, please use a scale of 1 to 10, in which 1 means that you consider it "totally unsatisfactory" and 10 means that you find it "totally satisfactory."

| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|-----------------------------------------------------------------------------------|------|------|------|------|------|------|
| The proximity of the centres | 7.62 | 7.68 | 7.64 | 7.53 | 7.74 | 7.85 |
| The opening hours | 7.10 | 7.10 | 7.05 | 7.14 | 7.18 | 7.35 |
| The treatment received by the health care staff | 7.38 | 7.36 | 7.33 | 7.35 | 7.42 | 7.50 |
| The home care service provided by the medical and nursing staff | 6.93 | 6.94 | 6.87 | 6.91 | 6.96 | 7.13 |
| The time devoted to each patient by the doctor | 6.49 | 6.49 | 6.32 | 6.4 | 6.58 | 6.76 |
| The knowledge of the health record and tracking of health problems of each user | 6.97 | 6.97 | 6.89 | 6.95 | 7.05 | 7.26 |
| The ease with which you can get an appointment | 6.59 | 6.63 | 6.45 | 6.54 | 6.51 | 6.89 |
| The confidence and assuredness conveyed by the doctor | 7.40 | 7.38 | 7.27 | 7.35 | 7.40 | 7.54 |
| The waiting time until getting in to see the doctor on the day of the appointment | 5.59 | 5.58 | 5.48 | 5.52 | 5.56 | 5.79 |
| When needed, the general practitioner sends you to a specialist | 7.10 | 7.20 | 7.09 | 7.17 | 7.19 | 7.26 |
| The technological equipment and means existing at the centres | 6.48 | 6.71 | 6.55 | 6.49 | 6.66 | 6.87 |
| The information you receive on your health problem | 7.16 | 7.11 | 7.06 | 7.06 | 7.20 | 7.34 |
| The doctor's advice on diet, exercise, smoking, alcohol, etc. | 7.09 | 7 | 6.99 | 7 | 7.12 | 7.25 |
| The time it takes the doctor to see you after you have asked for an appointment | 6.57 | 6.44 | 6.32 | 6.22 | 6.18 | 6.44 |
| The time it takes to have medical tests done | - | - | 5.26 | 5.22 | 5.24 | 5.45 |

At the opposite extreme, the lowest score is given to the amount of time it takes to have medical tests done (5.45) and the time you have to wait to get in to see the doctor on the day of the appointment (5.79).

However, the important factor which must be emphasized is that most of the aspects which have been researched over the years are rated in a very satisfactory or fairly satisfactory manner, and that this trust has remained steady across the various editions of the Health Barometer.

Two pieces of information stand out from the results of this edition. First of all, the fact that the majority assign a "B" grade to 9 out of the 15 aspects which are covered. And secondly, that for the people all of the circumstances studied were worthy of a higher score than they received in all of the Health Barometers since 2005.

3.3. Emergency Care

Of the people surveyed, 30.1 percent state that in the last 12 months they have gone to an emergency service at a public or private health care centre, a percentage slightly lower than that of the preceding year (31.5%).

| <i>“Over the last twelve months, have you had to go to a public or private health care centre due to some emergency?” Not accompanied by any family member, friend, neighbour...</i> | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 29.6 | 29.1 | 31.7 | 31.4 | 31.5 | 30.1 |
| No | 70.4 | 70.9 | 68.2 | 68.6 | 68.4 | 69.9 |
| No response | 0 | 0 | 0.1 | 0 | 0.1 | 0 |

The average frequency with which they used the public health care services was 1.82 times, and 0.20 times for private hospital emergency services. Both are practically identical to the results which were found in prior years.

The emergency services of public centres were used by women an average of 2.01 times and by men an average of 1.58. Private centres were used on average 0.23 times by women and 0.16 times by men.

As in prior years, in 2010, as well, most of the people (46.3 percent) who had some sort of health problem which required immediate care preferred the emergency service of a public hospital as the single and sole option, without having first requested care at a primary care emergency service. This percentage is 2.3 points higher than in the preceding year (44%), though it is lower than in all of the preceding years.

In order to receive clinical care when an emergency care need arises, public hospitals are the most widely used institutions by the majority of patients.

| <i>“The last time you had a medical emergency, what type of service did you use?”</i> | | | | | | |
|---------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Only a public primary care (non-hospital) emergency service | 33.1 | 32.6 | 35.2 | 35.6 | 40.9 | 39.5 |
| Only an emergency service at a public hospital | 50.7 | 53.4 | 49.5 | 48.7 | 44 | 46.3 |
| A primary care emergency service (non-hospital) and a hospital, both public | 7.3 | 4.9 | 6.6 | 7 | 6.4 | 6.1 |
| A private primary care emergency service (non-hospital) and a public hospital | 2.4 | 2.5 | 2.5 | 2.5 | 2.8 | 2.1 |
| Another response | 5.7 | 5.6 | 5 | 5.3 | 5.1 | 4.6 |
| Does not remember | 0.3 | 0.1 | 0.3 | 0.1 | 0.1 | 0.3 |
| No response | 0.5 | 0.9 | 0.9 | 0.7 | 0.7 | 1.2 |

Therefore, more than 5 out of every 10 people go to the emergency services at hospitals, whether because it is the only immediate option, or as a complement to the care that they have received earlier at a public or private primary care service. In this edition of the Barometer, this option of going to the hospital is seen at a percentage (54.5%) similar to that of 2009 (53.2%).

The second most widely used alternative is the public primary care emergency service, where 39.5% of the people who required emergency care sought care. In the series which is shown, one can see that people are starting to make greater use of primary care emergency services.

Of all the people who went to the emergency service of a public hospital to solve a health problem which required immediate care, eight out of every ten (78.8 percent) did so on the basis of a personal decision.

This variable, which may be forming a trend towards an increase, is the highest percentage found in any edition of the Barometer. Moreover, it would make it clear, once again, that there is a preponderance [greater credit] held by the emergency services of public hospitals in resolving urgent problems, and the people's trust in these clinical units. Only 20.4% of those who went to a hospital emergency room did so because they were instructed to by a family doctor or because they were sent there from a primary care emergency service.

| <i>"The last time you went to the hospital's emergency service, it was because..."</i> | | | | | | |
|----------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| You decided to go there directly | 71.9 | 74.5 | 75.8 | 75.8 | 74.1 | 78.8 |
| You were sent by your general practitioner (*) | 16 | 15.4 | 15 | 12.6 | 15.4 | 12.4 |
| You were sent there by the primary care emergency service | 11 | 7.9 | 7.2 | 9.2 | 8.6 | 8 |
| You were sent by a private doctor | 0.4 | 1.1 | 1.1 | 0.5 | 1 | 0.4 |
| No response | 0.7 | 1.1 | 0.9 | 1.8 | 0.9 | 0.3 |
| (*) Family doctor | | | | | | |

To expand upon the knowledge about the care which is requested at the emergency rooms of public hospital, the following new question was included in the year 2010 edition of the survey.

| <i>"The last time you went, were you admitted to the hospital?"</i> | |
|---------------------------------------------------------------------|------|
| | 2010 |
| Yes | 17.9 |
| No | 76.3 |
| No response | 5.7 |

The result shows almost 8 out of every 10 people who went to the emergency service of a public hospital mainly did so as the result of a personal, not a clinical, decision

and did not require admittance into the hospital. This leads one to think about whether the emergency services at public hospitals are being used appropriately. If, of all the people who went to the emergency services at public hospitals, only 17.9 percent of them required admittance, it is logical to think that a large portion of those emergency procedures could have been attended to and resolved through other emergency care systems and, as a result, they should otherwise have undergone the proper care at the primary care level.

The reasons pointed out by the people who went directly to the hospital emergency service were two: that the hospital would be equipped with a better set of means and a better ability to solve problems (for 37.7%) or because [the time when the problem occurred] was outside of the opening times of their family doctor (in 36.5% of all cases).

| <i>And, of the following, which was the main reason why you went to the emergency service of a hospital?</i> | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|--------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| Because I needed to go outside of the opening times of my general practitioner (family doctor) | 36.2 | 39.4 | 38.6 | 41.8 | 37.9 | 36.5 |
| Because the centre where my family doctor and/or paediatrician sees me has no emergency services | 5.9 | 5.2 | 7.3 | 5.1 | 6.7 | 5.4 |
| Because I am not familiar with the primary care centre's emergency services | 3.2 | 1.7 | 1.4 | 2.4 | 2.7 | 2.5 |
| Because they have better means and solve problems better at the hospital emergency room | 37.6 | 37.9 | 35.2 | 35.3 | 34.8 | 37.7 |
| Because I was given a very late appointment to see a specialist for the health problem I had | 2.3 | 2.3 | 1.9 | 2.3 | 2.3 | 2.4 |
| Because I was not in my normal place of residence | 2.8 | 2.6 | 3.8 | 3.2 | 4.3 | 3 |
| Another response | 10.7 | 9.5 | 10.9 | 9.5 | 10.2 | 11.3 |
| No response | 1.3 | 1.4 | 0.9 | 0.4 | 1.1 | 1.2 |

The other reasons for which the people surveyed stated that they went to the emergency services of a hospital were given in notably lower percentages than the two reasons indicated above.

For 8 out of every 10 of the people given care at a primary care emergency service or that of a hospital (77.8%), the care which they received was very good or good.

Men (78.1%) state that the care in emergency services was very good or good at a rate practically equal to women (77.6%).

| <i>And do you think you were given good, fairly good, average or poor care?</i> | | | | | | |
|---------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Very good | 19.6 | 23.2 | 22.9 | 19.3 | 22 | 20 |
| Good | 58.2 | 53.7 | 56.5 | 55.9 | 55.7 | 57.8 |
| Average | 14.6 | 14.4 | 13.6 | 16.1 | 15 | 14.7 |
| Poor | 3.9 | 4.7 | 3.8 | 4.1 | 3.5 | 4 |
| Very poor | 2.9 | 2.7 | 2.6 | 3.3 | 3 | 2 |
| Some other answer | 0.1 | 0.3 | 0.1 | 0 | 0.1 | 0 |
| Does not remember | 0.1 | 0.1 | - | 0.1 | 0 | 0.1 |
| No response | 0.6 | 0.9 | 0.4 | 1.1 | 0.8 | 1.2 |

As for the speed with which they received care at the emergency room, the percentage of people who believe that it was given very quickly or fairly quickly (63.8%) is similar to the percentage found in recent years. The care was provided not very quickly or not quickly at all in the opinion of 34.8%, a result very similar to that of prior years.

| <i>Compared with the health care you received the last time you went to the emergency room, do you feel you were assisted very quickly, fairly quickly, not very quickly, or not quickly at all?</i> | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Very quickly | 18.9 | 20.5 | 20.2 | 17.3 | 20.6 | 16.1 |
| Fairly quickly | 45.8 | 45.4 | 45.7 | 46.9 | 43.8 | 47.7 |
| Not very quickly | 24.3 | 22.4 | 23.4 | 23.7 | 24.1 | 24.2 |
| Not quickly at all | 9.8 | 10.4 | 10.2 | 10.5 | 10.4 | 10.6 |
| Some other answer | 0.4 | 0.3 | 0 | 0.2 | 0.5 | 0.2 |
| Does not remember | - | 0.1 | 0 | 0.4 | 0 | 0.1 |
| No response | 0.8 | 0.9 | 0.5 | 1 | 0.7 | 1.1 |

3.4. Specialist care: Ambulatory care

In the 12 months prior to taking the survey, nearly half of all people (46.1%) went to an appointment with a specialized physician.

| <i>In the last twelve months, have you gone to see a specialized physician other than a dentist? We are referring to an actual visit and not just asking for an appointment, or having an X-ray or some other test or analysis, or to accompany another person.</i> | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 46.2 | 44.1 | 45.6 | 47.2 | 45.3 | 46.1 |
| No | 53.5 | 55.8 | 54.1 | 52.7 | 54.3 | 53.4 |
| Does not remember | 0.2 | 0.1 | 0.2 | 0.1 | 0.3 | 0.3 |
| No response | 0.1 | 0 | 0.1 | 0 | 0.1 | 0.1 |

Visits made to the public health care system were the most common, with an average of 2.05 times in the twelve months prior to the survey; people went to see private health care system specialists an average of 0.65 times over the same time period.

The women interviewed went to see a specialist at a higher rate (52.1%) than men did (40%).

“And in these last twelve months, can you remember how many times you went to see a specialist in the public health care system? How many times did you see one in the private system?”

| Average visits to specialists | Total | Women | Men |
|--------------------------------------|--------------|--------------|------------|
| Public health care | 2.05 | 2.14 | 1.93 |
| Private health care | 0.65 | 0.68 | 0.61 |

In the population as a whole, those specialty areas which received the greatest number of visits were trauma care (19.6 percent), gynaecology (12.5%), ophthalmology (9%), cardiology (8.1%), urology (6.7%) and digestive medicine (6.1%).

In addition to the visits made to obstetricians and gynaecologists (21.7%), which were those to which women went the most, women had a greater prevalence of going to see trauma specialists (19.5%), ophthalmologists (8.5%) and cardiologists (7.3%), which are results that greatly resemble those from the preceding year.

Men mostly went to see trauma specialists (19.6%), urologists (13.4%), ophthalmologists (9.8%) and cardiologists (9.1%), which are also results very similar to those found in the year 2009 edition.

“And the last time you had an appointment with a specialist, how much time elapsed from the date when you requested the appointment to the appointment date?” [Only to those who went to public health system specialists]

| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|--------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Up to 15 days | 16.8 | 18.3 | 17.4 | 19.2 | 17.6 | 16.5 |
| Up to 1 month | 16.8 | 17.9 | 18 | 19.2 | 19.6 | 17 |
| Up to 2 months | 17.4 | 16.8 | 17.3 | 15.8 | 17.4 | 17.5 |
| Up to 3 months | 14 | 13.7 | 14.4 | 13.3 | 13.5 | 13.6 |
| Up to 4 months | 5.6 | 5.1 | 4.8 | 5.1 | 5.3 | 6.3 |
| Up to 5 months | 2.9 | 2.4 | 2.5 | 2.3 | 2.3 | 3 |
| Up to 6 months | 7.6 | 7.8 | 7.7 | 7 | 7 | 7.4 |
| More than 6 months | 7.6 | 7.7 | 7 | 7.1 | 6.9 | 6.4 |
| Does not know | 9.5 | 8.1 | 9.6 | 9 | 8.4 | 2.4 |
| No response | 1.6 | 2.1 | 1.1 | 2 | 1.8 | 7.1 |

Of the people who went to see a public health system specialist in the twelve months prior to taking the survey, 33.5 percent were seen within a time period that did not surpass 30 days as of the date when they has requested an appointment, a figure which is 3.7 points lower than it was in 2010 (37.2%).

In the remaining waiting time intervals, the proportions remained similar to those which were found in prior editions, which means that there was no notable variation in the amount of time which patients had to wait in order to be seen by medical specialists.

As commented on in the preceding paragraph and broken down in the following table, the percentage of people who had to wait less than 1 month decreased by 3.7 points. On the other hand, the survey takers who claim they had to wait from 1 to 3 months increased by a small amount, as did the number of people who had to wait for more than three months.

| Waiting time not greater than 1 month | | | | | Waiting time from 1 to 3 months | | | | | Waiting time more than 3 months | | | | |
|---------------------------------------|------|------|------|------|---------------------------------|------|------|------|------|---------------------------------|------|------|------|------|
| 2006 | 2007 | 2008 | 2009 | 2010 | 2006 | 2007 | 2008 | 2009 | 2010 | 2006 | 2007 | 2008 | 2009 | 2010 |
| 36.2 | 35.4 | 38.4 | 37.2 | 33.5 | 30.5 | 31.7 | 29.1 | 30.9 | 31.1 | 23 | 22 | 21.5 | 21.5 | 23.1 |

Of the people who had gone to see public health care system specialists, 81.5 percent state that the assistance they received was *very good or good*. Only 4.4% stated that the specialists' care was *poor or very poor*, which is the same percentage that was found in prior editions.

| <i>"In general, the care which you received during your visit to the public health system specialist was..."</i> | | | | | | |
|------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Very good | 16.3 | 19.3 | 22.8 | 17.8 | 20.7 | 21.1 |
| Good | 60.2 | 62.3 | 58.3 | 64 | 61.3 | 60.4 |
| Average | 17.2 | 13 | 13.2 | 13.2 | 13.2 | 13.4 |
| Poor | 2.9 | 2.5 | 2.8 | 2.9 | 2.2 | 3 |
| Very poor | 1.4 | 1.6 | 1.8 | 1.1 | 1.2 | 1.4 |
| It depends, on some visits it was good, and on other it was poor (*) | 1.3 | 0.5 | 0.6 | 0.5 | 0.6 | 0.5 |
| Does not remember | 0 | 0.1 | 0 | 0 | 0.1 | 0 |
| No response | 0.7 | 0.7 | 0.5 | 0.6 | 0.7 | 0.1 |

(*) This response is not provided by the survey-takers but is included when the interviewee gives it as a spontaneous response.

6 out of every 10 people (57.4%) state that the care which they received at their visits to specialists had lived up to their expectations, or in other words had turned out more or less the way they had expected it to be.

The percentage of people who stated that they were attended to *better or much better* than they had expected fell by a half point compared to 2009. On the other hand, those who believe the care they received was *worse or much worse* than they had expected increased by 1.7 points in comparison with 2009.

| <i>"And compared with what you expected, the assistance you received was..."</i> | | | | | | |
|----------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Much better | 3.4 | 4.7 | 5.8 | 4 | 5.3 | 4.5 |
| Better | 21.1 | 24.6 | 26.9 | 24.7 | 25.5 | 25.8 |
| More or less the same | 59.6 | 57.6 | 54.5 | 59.1 | 58.8 | 57.4 |
| Worse | 11.2 | 8.8 | 8.5 | 8.3 | 7 | 8.6 |
| Much worse | 2.1 | 1.8 | 2.3 | 1.5 | 1.6 | 1.7 |
| It depends, on some visits it was good, and on other it was poor (*) | 1.3 | 0.7 | 0.5 | 0.9 | 0.5 | 0.5 |
| Does not know | - | 0.1 | 0 | 0.2 | 0.1 | 0.1 |
| No response | 1.2 | 1.7 | 1.4 | 1.3 | 1.2 | 1.5 |

(*) This response is not provided by the survey-takers but is included when the interviewee gives it as a spontaneous response.

If, in order to resolve a health problem, it was necessary to go to the general practitioner (family doctor) and afterwards to a public health system specialist, more than half (55.7%) of the people who had gone to the latter believed that the coordination between the two doctors was adequate. However, for nearly one-quarter, 23%, the proper coordination did not exist; 18% did not have a formed opinion regarding this matter.

| <i>When a health problem of yours has required a visit to the general practitioner and a visit to a specialist, do you believe the coordination between the two was good?</i> | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|
| | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 53.4 | 51.7 | 49.1 | 49.1 | 55.7 |
| No | 22.2 | 24.3 | 24.8 | 24.7 | 22.9 |
| Does not know | 22.5 | 18.9 | 21.8 | 22.2 | 18.1 |
| No response | 1.9 | 5.1 | 4.3 | 4 | 3.3 |

Their opinion about the care they received on visits to specialist doctors was completed with an assessment of a set of twelve care-related factors.

| <i>"Regardless of whether you use the services of specialists in the public health care system, score the following aspects involving specialized health care."</i> | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| On a scale of 1 [meaning "totally unsatisfactory"] to 10 [meaning "totally satisfactory"]. | | | | | | |
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| The time the doctor devotes to each patient | 6.16 | 6.23 | 6.21 | 6.18 | 6.30 | 6.50 |
| The number of specialties to which one has access | 7.15 | 7.31 | 7.24 | 7.28 | 7.36 | 7.47 |

(Continues.../...)

“Regardless of whether you use the services of specialists in the public health care system, score the following aspects involving specialized health care.”

On a scale of 1 [meaning “totally unsatisfactory”] to 10 [meaning “totally satisfactory”]. (Continuation)

| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
|-------------------------------------------------------------------------------------|------|------|------|------|------|------|
| The waiting time to see the doctor on the day of the appointment | 5.34 | 5.32 | 5.39 | 5.40 | 5.45 | 5.60 |
| The knowledge of your health record and tracking of health problems of each patient | 6.40 | 6.41 | 6.43 | 6.41 | 6.47 | 6.64 |
| The confidence and assuredness conveyed by the doctor | 6.87 | 6.90 | 6.88 | 6.97 | 6.99 | 7.13 |
| The ease with which you can get an appointment | 5.20 | 5.27 | 5.30 | 5.32 | 5.41 | 5.60 |
| The technological equipment and means existing at the centres | 7.05 | 7.20 | 7.16 | 7.24 | 7.30 | 7.40 |
| The treatment received by the health care personnel | 7.04 | 7.11 | 7.07 | 7.09 | 7.21 | 7.20 |
| The information you receive on your health problem | 6.92 | 6.94 | 6.91 | 6.94 | 7.03 | 7.13 |
| The doctor’s advice on diet, exercise, smoking and alcohol, etc. | 6.68 | 6.78 | 6.81 | 6.79 | 6.90 | 6.98 |
| The time it takes to see the doctor once you have asked for an appointment | 4.56 | 4.68 | 4.71 | 4.67 | 4.78 | 4.89 |
| The time it takes to get a medical test performed | - | 4.73 | 4.70 | 4.65 | 4.72 | 4.87 |

On the basis of these results, two factors must be underlined. On the one hand, people give a high score to all of these aspects, if we bear in mind that half are given score of over 7 out of 10. Secondly, the score for each of them in this edition is the highest it has been since 2005.

As in prior editions of the survey, in this one the most highly scored aspects are also the number of specialties to which patients have access (7.47); the technological equipment and means existing at the specialists’ centres (7.40) and the treatment received from the health care personnel (7.20).

The aspects which are given the lowest scores are related with the delays in receiving care: the time one must wait to see the doctor on the day of the appointment (5.60); the time it takes to receive the results of diagnostic tests (4.87) and the delay in being seen by the doctor once you have asked for an appointment (4.89). The aspects which were given the lowest scores by people this year are the same ones which were ranked lowest in preceding years.

3.5. Specialist care: Hospitalization

Throughout the last year, 1 out of every 10 people surveyed (9.7%) were admitted into a hospital, public or private. A greater percentage of women (10.8%) were admitted than men (8.6%).

| <i>"In the last twelve months, were you ever admitted into a public or private hospital?"</i> | | | | | | |
|-----------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 9.8 | 9.5 | 10.9 | 10.1 | 9.8 | 9.7 |
| No | 90 | 90.4 | 89.1 | 89.9 | 90.1 | 90.3 |
| No response | 0.1 | 0.1 | 0 | 0.1 | 0.2 | 0 |

In the population as a whole, the people who were hospitalized were admitted an average of 1.22 times into a public hospital and 0.16 times into a private centre. Women were admitted a greater number of times than men were.

| <i>"And, can you remember how many times you had to be hospitalized in a public hospital? And how many times in a private one?"</i> | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|-------|-------|------|
| Average | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | | |
| | | | | | | Total | Women | Men |
| Public hospital | 1.17 | 1.08 | 1.20 | 1.16 | 1.13 | 1.22 | 1.30 | 1.11 |
| Private hospital | 0.18 | 0.27 | 0.24 | 0.20 | 0.24 | 0.16 | 0.17 | 0.16 |

Surgical interventions are the main reason for admittance into public hospitals: 45.3% of the people who were hospitalized were admitted in order to undergo a surgical intervention.

As can be seen on the following table, as of 2007 the second most important reason for being admitted was to receive treatments which, due to their importance, had to be performed while admitted into the hospital for clinical monitoring and nursing care. In this edition, the percentage of admittance for this reason (20.4%) was the highest over the time period.

Last of all, the completion of special studies to perform clinical tests was the third most important reason for being admitted into public hospitals (15.1%).

| <i>"The most recent admittance into a [public] hospital was for..."</i> | | | | | | |
|-------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| An operation | 49.3 | 44.4 | 45.5 | 50.1 | 47.2 | 45.3 |
| A special test to find out what I had | 16.3 | 18.7 | 17.2 | 14.6 | 15.6 | 15.1 |
| A treatment that I could only be given while admitted | 14 | 17.1 | 18.9 | 17.8 | 17.8 | 20.4 |
| Childbirth / Caesarean | - | - | - | - | - | 11.8 |
| Other reasons | 18.9 | 18.5 | 17.5 | 17.2 | 18.8 | 7.4 |
| No response | 1.5 | 1.3 | 0.9 | 0.3 | - | 0.1 |

In order to gain better knowledge of the causes for admittance into public hospitals, a new response variable was added to this edition of the Barometer for this question: *childbirth or a Caesarean* as a cause of hospitalization. Its inclusion shows this important reason for the admittance of women into hospitals, which up to now had simply formed part of the generic variable *other reasons*.

In the population as a whole, admittances due to childbirth or Caesarean account for 11.8% of the total number. However, of all the women who were admitted into a public hospital, 20.7% of them were admitted for obstetric reasons (childbirth or Caesarean).

Of the patients who were admitted as patients into a public hospital for an operation, the percentage of those who were informed of more or less how long it would take to be admitted when they were told they would have a surgical intervention increased (74.7%); in turn, the number of people who were not informed of the waiting time for their admittance decreased. Both results seem to indicate an improvement in the quality of care, because patients are informed of a circumstance –admittance into a hospital- which is experienced with great concern.

| <i>“When you were informed that you would be having an operation, were you told more or less how much time would elapse before you were admitted into the hospital?”</i> | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 72.1 | 76.4 | 69.9 | 73.1 | 73.1 | 74.7 |
| No | 24.3 | 20.3 | 27.8 | 25.3 | 24.4 | 22.5 |
| Does not know - No response | 3.6 | 3.3 | 2.3 | 1.6 | 2.5 | 2.8 |

Regardless of the reason for being admitted into the hospital, 7 out of every 10 patients hospitalized (70.5%) were assigned a responsible physician whom they could see during their stay at the hospital to solve the problems caused by the clinical procedure or any health-related problems which had led to their hospitalization. There was a 1 percentage point increase in the people who were not assigned a physician, a figure which has reached one-fifth of all the patients who were admitted.

| <i>“During your stay at the hospital, were you assigned a responsible physician to turn to for anything related with your health problem?”</i> | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 68.5 | 73.4 | 72.5 | 69.8 | 69.5 | 70.5 |
| No | 22.7 | 17.8 | 17.9 | 21.9 | 20.2 | 21 |
| Does not remember | 6.9 | 3.3 | 4.5 | 5.6 | 6.3 | 6.5 |
| No response | 1.8 | 5.5 | 5.1 | 2.8 | 4 | 2 |

Although it is 1.8 points lower than what was found in the preceding year, in this edition of the Health Barometer, too, the people state, at a very high percentage, their satisfaction with the care received at public hospitals: 85.7 percent of the people

who were hospitalized at a public centre state that the care they received was *good or very good*.

Both women and men assign a high score to the care they received at the hospital: it was *very good or good* for 86.1% of all women and 85.2% of all men.

| <i>"In general, the care which you received at the public hospital was..."</i> | | | | | | |
|--------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Very good | 33 | 28.6 | 32.1 | 25.5 | 32.9 | 31.1 |
| Good | 52.8 | 54.9 | 52.4 | 60.1 | 54.6 | 54.6 |
| Average | 10.1 | 8.1 | 8.8 | 10.1 | 8.1 | 7.5 |
| Poor | 1.7 | 1.6 | 1.4 | 2.3 | 2.1 | 2.5 |
| Very poor | 0.6 | 1.3 | 0.8 | - | 0.8 | 2 |
| No response | 1.8 | 5.5 | 4.5 | 2 | 1.5 | 2.2 |

For 46.1% of the people who were admitted into a public hospital, the care was *much better or better* than they had expected, a percentage which was higher (+ 0.9) than the figure reported the year before. To 7.4% of the people hospitalized at publicly run centres, the care was *worse or much worse* than they had expected it to be.

| <i>"And in terms of your expectations, this care was..."</i> | | | | | | |
|--------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Much better than I had expected | 11.9 | 13.4 | 12.9 | 9.3 | 12.7 | 12.5 |
| Better | 31.1 | 33.2 | 34.6 | 30.8 | 32.5 | 33.6 |
| More or less the same | 47.7 | 46.3 | 42.8 | 49.7 | 47.3 | 45.5 |
| Worse | 6.8 | 3.8 | 6.1 | 8.2 | 4.4 | 6.5 |
| Much worse | 1.5 | 1.2 | 1.3 | 1.1 | 2 | 0.9 |
| No response | 1 | 2.1 | 2.3 | 0.9 | 1.1 | 1.1 |

The percentage of women (50.4%) is greater than that of men (40.4%) who believe that the care which they received was *better or much better* than what they had expected it to be. On the contrary, the percentage of men (52.4) is greater than that of women (40.2) who state that the care was *more or less the same* as they had expected it to be.

From these results, one can deduce that, prior to admittance, the expectations that women had about how their stay at the public hospital was going to be was worse than it turned out to be in actuality. Half of them stated that the care had been better or much better than they had expected it to be.

| <i>“ And in terms of your expectations, this care was ...”</i> | | |
|----------------------------------------------------------------|--------------|------------|
| 2010 | Women | Men |
| Much better or better than I had expected | 50.4 | 40.4 |
| More or less the same | 40.2 | 52.4 |
| Worse or much worse than I had expected | 8.4 | 6.1 |

All of the people who took part in the survey, whether they were hospitalized or not, were asked to evaluate aspects related with the care that is provided at public hospitals, whether based on their own personal experience or the knowledge they have about how the care is at public hospitals.

Just as is commented about visits to medical specialists, it must be pointed out that most of the aspects involved in the care at public hospitals are awarded a high score.

Moreover, except for one of the topics in every edition of the survey -the treatment received by the non-health care personnel (orderlies, administrators) - and another in the editions of 2005 and 2006 –the care and attention of the nursing staff- which received a lower score (though they had the second highest score in this edition), in all of the others the score is the highest to be given throughout the six-year period for each of them.

The highest scored aspects are the technological equipment and means which are offered by hospitals (7.76); the care and attention given by the nursing staff (7.26) and the medical staff (7.24) and the information that patients receive about the developments in their health problem (7.22).

| <i>In terms of the care which is provided at public hospitals, assign a score to the following aspects, in accordance with your experience or the idea you have.”</i> | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| <i>A scale is used from 1 "totally unsatisfactory" to 10 "totally satisfactory"</i> | | | | | | |
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Food and accommodations-related aspects (meals, bathrooms and general comfort of the rooms) | 6.39 | 6.34 | 6.40 | 6.25 | 6.27 | 6.47 |
| Administrative procedures for admittance | 6.05 | 6.09 | 6.12 | 6.11 | 6.19 | 6.33 |
| Waiting time for non-emergency admittance | 4.18 | 4.45 | 4.53 | 4.46 | 4.54 | 4.74 |
| Care and attention given by the medical staff | 7.20 | 7.21 | 7.12 | 7.08 | 7.19 | 7.24 |
| Care and attention given by the nursing staff | 7.30 | 7.29 | 7.21 | 7.14 | 7.25 | 7.26 |
| The number of people who share a room | 5.50 | 5.38 | 5.44 | 5.32 | 5.47 | 5.65 |
| The treatment received by non-health care personnel (orderlies, administrators, ...) | 6.99 | 6.99 | 6.89 | 6.87 | 6.89 | 6.83 |
| The technological equipment and means existing at the hospitals | 7.61 | 7.68 | 7.58 | 7.61 | 7.72 | 7.76 |
| The information received on developments in your health problem | 7.11 | 7.12 | 7.02 | 7.05 | 7.15 | 7.22 |
| The doctors advice on diet, exercise, smoking, alcohol, etc. | 6.98 | 6.98 | 6.97 | 6.94 | 7.10 | 7.13 |

In terms of the aspects given the lowest scores, about which the people express the lowest satisfaction, repeated in this edition are the number of people with whom a room must be shared (5.65) and the time one must wait for non-emergency admittance (4.74), the only aspect under a score of 5 points.

4. Institutional information

Of the different aspects which are examined and analyzed in the yearly editions of the Health Barometer, those involving health care information are the lowest rated, or are at least those which received the lowest scores.

In 2010, this trend remained steady, even though the score for each of them was the highest throughout the period of reference.

Using a scale of 1 to 10 in which 1 means “no information is provided” to 10 meaning “a lot of information is provided,” the people interviewed were asked to evaluate five types of information related with the running of the public health care services.

| Score each of the following types of information provided by the public health care services. A scale is used in which 1 means “no information is provided” to 10 “a lot of information is provided” | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| The information which the Health Care Administration gives on the services which it provides | 4.82 | 5.02 | 4.86 | 4.90 | 4.98 | 5.07 |
| The information regarding patient rights and the ways to file complaints | 4.14 | 4.29 | 4.17 | 4.22 | 4.30 | 4.40 |
| The information on measures and laws implemented by the health care authorities | 4.19 | 4.46 | 4.40 | 4.42 | 4.48 | 4.58 |
| The information issued through the campaigns aimed at the population regarding the main health problems | 5.51 | 5.58 | 5.46 | 5.46 | 5.55 | 5.61 |
| The information available on what procedures [must be] carried out to gain access to a specialist or be admitted into a hospital | 5 | 5.01 | 5 | 5.11 | 5.18 | 5.20 |

In practically every edition of the Health Barometer, the ratings which the people assign to these 5 aspects involving information are the lowest of all the topics that are examined.

In this edition, this characteristic has remained unchanged, and although the results are slightly higher than in prior years, the ratings are once again lower than those received by other aspects of health care. In particular, most notable is the very low score given to *the information regarding patient rights and ways to file complaints*, as in previous years.

5. Waiting lists

In terms of the action by the different Health Care Authorities to improve waiting lists (a task which is the competence and direct responsibility of the Health Care Services of the Autonomous Regions), for the fifth year in a row there has been a decrease in the percentage of people who believe that action is being taken with this objective: 36.9% believe that action is taken with this purpose, a proportion which is 4.4 percentage points lower than in 2010, the lowest figure since 2005.

And although there has been a decrease of 2 points in the percentage of those who believe that no action is being taken, it is the people who “*Do not know*” (whether the health care authorities are taking action to improve waiting lists) who constitute the variable which has increased the most (6.2 points compared with 2010), remaining on a rising trend.

| <i>“Do you believe that the health care authorities are carrying out actions aimed at improving waiting lists?”</i> | | | | | | |
|---------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 45.7 | 48.5 | 47.3 | 42.3 | 41.3 | 36.9 |
| No | 32.2 | 30.1 | 31.9 | 34.1 | 35.4 | 33.5 |
| Does not know | 21.6 | 21.1 | 20.6 | 23.5 | 23.1 | 29.3 |
| No response | 0.4 | 0.2 | 0.2 | 0.1 | 0.2 | 0.3 |

From the results in this series, it can be inferred that the people have a critical attitude in terms of the action which, on a regular and periodic basis, is being put in place and developed by the health care services of the various Autonomous Regions to improve waiting lists. In terms of the efforts which the bodies of the administration responsible for its management claim that they are carrying out to improve waiting lists, a significant percentage of the people are unaware of them or do not perceive them, because nearly 3 out of every 10 people (29.3%) do not have a formed opinion about what is undoubtedly a health care *problem* which the people in general, and patients in particular, experience with notable concern.

Compared with previous years, the results of this year 2010 edition show that the opinion of people about the waiting lists problem has hardly changed at all. Half of them (49.7%) believe that this problem remains the same; there has been a 2.1 point increase in those who *Do not know* what has happened, and a 1.4 decrease in those who believe that it has grown worse. The increase in those who claim it has improved is very low (0.4 points).

| <i>"In general, do you think that the problem of waiting lists in the last twelve months...? "</i> | | | | | | |
|----------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Has improved | 23.6 | 24.4 | 23.9 | 20.1 | 20.7 | 21.1 |
| Has become worse | 11 | 9.7 | 11 | 14.1 | 13.1 | 11.7 |
| Has remained the same | 50.8 | 51.2 | 50.4 | 50.2 | 50.8 | 49.7 |
| Does not know | 14.5 | 14.6 | 14.6 | 15.6 | 15.2 | 17.3 |
| No response | 0.1 | 0.1 | 0.1 | 0.1 | 0.1 | 0.2 |

6. De-centralization of health care management

Now that 9 years have elapsed since the date when the process for transferring the management of health care services to the Autonomous Regional Administrations was carried out (January 1, 2002), one-quarter of the people (25.7%) do not yet have a formed opinion about whether the consequences of the delegation of the health care services (assistance) from the General State Administration have been favourable or unfavourable in terms of the health care which they receive.

| <i>"You believe that, by having health care managed by the Autonomous Regions instead of the State, people receive service which is...?"</i> | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Better | 29.9 | 33.3 | 30.8 | 30 | 28.7 | 28.4 |
| The same | 37.5 | 36.3 | 38.8 | 36.7 | 36.4 | 36.6 |
| Worse | 7.5 | 6.8 | 6.9 | 9.8 | 10.3 | 9.3 |
| Does not know - No response | 25.1 | 23.6 | 23.5 | 23.5 | 24.6 | 25.7 |

For nearly 3 out of every 10 people (28.4%) health care services are better when their management is performed by the Autonomous Regional Administrations instead of the State. For a somewhat higher percentage (36.6%), the services which they receive from their respective Autonomous Regions are the same as when their management was centralized and responsibility was held by the State Administration. And one out of every ten people (9.3%) claim that the services managed by the Autonomous Regions are worse than when the management was the responsibility of the Central Administration.

As shown on the following table, 4 out of every 10 people (39.8%) state that they do not have a formed opinion (*Does not know*) about how the public services which are provided by their Autonomous Region compare with those offered by other Autonomous Regional Administrations to their residents, and for 3 out of every 10 (31.6%) they are the same. 16.1% of the people state that the health care services provided to them by their Autonomous Region are better than those given by other Autonomous Regions, which is 1.3 points higher than in 2009.

| <i>"Compared with the public health care services of other Autonomous Regions, you believe that those which you receive in this Autonomous Region are..."</i> | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Better | 14 | 16.2 | 16.6 | 14.8 | 14.8 | 16.1 |
| The same | 36.1 | 35.1 | 35.9 | 32.6 | 32.1 | 31.6 |
| Worse | 11.8 | 12 | 12.8 | 13.8 | 14 | 11.9 |
| Does not know | 37.5 | 36 | 34.3 | 38.1 | 38.5 | 39.8 |
| No response | 0.6 | 0.7 | 0.4 | 0.7 | 0.6 | 0.7 |

83.6 percent of all people state their conviction that the Administrations of the different Autonomous Regions have the obligation to reach agreements amongst one another when it comes time to offer new services to the population.

| <i>"Now that all of the Autonomous Regions are responsible for their own health care services, do you believe they should reach agreements amongst each other when it comes time to offer new services to the people?"</i> | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Yes | 82.9 | 84 | 85.8 | 86.2 | 84.9 | 83.6 |
| No | 4.3 | 3.2 | 4 | 3.6 | 3.7 | 4.5 |
| Does not know - No response | 12.7 | 12.9 | 10.2 | 10.2 | 11.4 | 11.9 |

7. Changes in primary care and specialist care

42.7% of all people state that in the past 5 years primary care service has improved. Compared with prior years, in 2010 the perception of improvement also exists for specialist care, in terms of both ambulatory services (36.3% state this) and under hospitalization (39.4%).

Four out of every ten people (approximately 42%) believe that in the last 5 years there have been no changes in the quality of the health care services (they

"In your opinion, has each of the following health care services improved, become worse or remained the same in the last five years?"

| | | Primary care | Specialist care visits | Specialist care [at a hospital] |
|------------------|------|--------------|------------------------|------------------------------------|
| Has improved | 2005 | 47.6 | 38.8 | 41.6 |
| | 2006 | 48.3 | 40.6 | 43.2 |
| | 2007 | 47.4 | 40.5 | 42.3 |
| | 2008 | 41.8 | 35.9 | 37.8 |
| | 2009 | 42.3 | 35.8 | 37.6 |
| | 2010 | 42.7 | 36.3 | 39.4 |
| Has become worse | 2005 | 5 | 7.2 | 6 |
| | 2006 | 5.2 | 6.5 | 5.3 |
| | 2007 | 5.9 | 6.9 | 6.4 |
| | 2008 | 8.8 | 9.5 | 8.6 |
| | 2009 | 8.3 | 9.7 | 8.9 |
| | 2010 | 7.9 | 8.9 | 7.5 |
| Remains the same | 2005 | 40.2 | 42 | 39.4 |
| | 2006 | 39.7 | 41.4 | 39.1 |
| | 2007 | 40.3 | 41.1 | 39.8 |
| | 2008 | 41.4 | 42.3 | 40.6 |
| | 2009 | 41.8 | 42.7 | 40.8 |
| | 2010 | 42.3 | 43.5 | 40.6 |
| Does not know | 2005 | 7 | 11.8 | 12.7 |
| | 2006 | 6.7 | 11.3 | 12.1 |
| | 2007 | 6.1 | 11 | 11 |
| | 2008 | 7.7 | 12 | 12.6 |
| | 2009 | 7.3 | 11.5 | 12.3 |
| | 2010 | 6.8 | 10.9 | 12.1 |

Every year, and in every section, the percentage of "No response" was lower than 0.5 percent

remain the same) in terms of both primary care and visits for specialist care and hospitalization.

Last of all, in primary and specialist care, the already low percentage of people who believe that health care services have become worse over the last five years has decreased.

8. Equity in the National Health System

In the different circumstances in which one analyzes what the surveyed people's perception is about whether the public health care service benefits are the same for all people, one can see that a person's status as a man or woman is not considered to be a differentiating factor (87.7% state this in the survey).

However, the results do show that the place of residence may be a reason for a lack of equality. For instance, whereas 43.8% of people believe that the public health care system provides the same health services to all people regardless of the Autonomous Region in which they reside, another 30.9% state their belief that the same services are not provided in the various Autonomous Regions. The remaining 25% do not have a formed opinion.

"In your opinion, does the public health care system provide the same services to all people regardless of whether...?"

| | | You live in one Autonomous Region or another | You live in a rural area or a city | You are young or old | You have a high or low social status | You are male or female | Your are Spanish or foreign | You have legal residency or not |
|---------------------------------------|------|----------------------------------------------|------------------------------------|----------------------|--------------------------------------|------------------------|-----------------------------|---------------------------------|
| YES the same services are provided | 2005 | 44.5 | 41.7 | 66.2 | 61.1 | - | - | - |
| | 2006 | 46.6 | 42.3 | 71.2 | 67.9 | 87.8 | 65.9 | 55 |
| | 2007 | 45.3 | 43.5 | 71.2 | 68.8 | 87.5 | 64.9 | 54.5 |
| | 2008 | 43.3 | 43.4 | 73.3 | 70.6 | 88.6 | 65.2 | 54.7 |
| | 2009 | 42 | 44.8 | 72.7 | 70.1 | 87.1 | 62.6 | 52.9 |
| | 2010 | 43.8 | 46.3 | 73.2 | 70.9 | 87.7 | 64.5 | 56.4 |
| NO the same services are not provided | 2005 | 28.3 | 41.9 | 22.1 | 25.5 | - | - | - |
| | 2006 | 30.2 | 46.1 | 21.8 | 23.6 | 7.4 | 18.5 | 20.6 |
| | 2007 | 31.1 | 44.9 | 22.6 | 23.5 | 8 | 20.6 | 20.9 |
| | 2008 | 33.4 | 45.4 | 20.3 | 22 | 7.2 | 20.6 | 20.9 |
| | 2009 | 33.6 | 41.3 | 20.1 | 21.4 | 7.5 | 20.9 | 20.2 |
| | 2010 | 30.9 | 40.4 | 19.7 | 21.2 | 7.3 | 20.9 | 19.4 |
| Does not know | 2005 | 27.1 | 16.2 | 11.4 | 13.1 | - | - | - |
| | 2006 | 22.9 | 11.4 | 6.7 | 8.1 | 4.4 | 15.2 | 23.9 |
| | 2007 | 23.4 | 11.3 | 5.8 | 7.2 | 4 | 14 | 23.9 |
| | 2008 | 23.1 | 10.9 | 6.2 | 6.9 | 4 | 14 | 24.2 |
| | 2009 | 24.1 | 13.6 | 6.8 | 8.1 | 5 | 16 | 26.3 |
| | 2010 | 25.1 | 13.1 | 6.7 | 7.6 | 4.7 | 14.2 | 23.6 |

Every year, and in every section, the percentage of "No response" was lower than 0.5 percent.

As for the place of residence, -an urban or rural area-, the percentage of people who believe that the same services are provided in both types of areas is 46.3%, *compared* with 40.4% who believe that the same health care benefits are not provided in both.

It is observed that people show they have better knowledge of the differences in their closer environment (rural or urban) than the knowledge they may have about the Autonomous Region in which they live: the percentage (13.1%) of those who have no opinion (*Does not know*) about what happens in their local area is practically half of that which is found for their Autonomous Region (25.1%).

However, the results are better when compared with those of 2009: the percentage of those who believe that the same services are provided has gone up by 1.5 points, and that of those who believe they are not has gone down by 0.9 points. These figures suggest that residing in a *rural area or in a city* would be a circumstance which could lead to having a perception of a certain lack of equality in providing health care services. Although these figures are clear, the reasons which may influence a person in having this perception are many and complex: geographic distance from second and third level health care centres (hospitals), difficulty in displacements, the concentration of technological means in cities, etc., unavoidable circumstances due to the social and political organization of people and health care services.

As for other circumstances, such as gender, age, social status, nationality and legal residency status, the year 2010 results are very similar to those of prior years.

It can be concluded that the results of the year 2010 Barometer once again demonstrate that some of the people believe that there is inequality (or a lack of equality) in the services provided by the public health care system: 31% due to the Autonomous Region where they reside; 40% due to living in an urban or rural area; 21% believe it is due to a higher or lower social status; on the basis of nationality, whether one is Spanish or foreign, for 21%, and in similar proportions on the basis of age (young or old) (20%) or because one has or does not have legal residency (19%).

9. Self-evaluation of state of health

In this edition, and as a variable for cross-referencing, a question has been included for the first time to examine the opinion people have about their own state of health.

| <i>“How would you describe your own general state of health: very good, good, average, low or very low?”</i> | |
|--------------------------------------------------------------------------------------------------------------|-------------|
| | 2010 |
| Very good | 15.1 |
| Good | 57 |
| Average | 23.2 |
| Low | 3.8 |
| Very low | 0.6 |
| Does not know - No response | 0.1 |

7 out of every 10 people (72.1%) claim that their state of health is *very good or good*; 23 percent that it is *average* and 4.4 percent that it is *bad or very bad*.

10. Rating measures to fight the habit of tobacco use

In the editions of the Health Barometer over the last 5 years, people have been asked to what degree they agree with four aspects directly related with Act 28/2005 of 26 December 2005 *on health care measures to fight tobacco use and regulate the sale, supply, use and advertising of tobacco products* (published in the Official State Gazette, or BOE, on 27 December 2005), which is better known as the “Tobacco Act.”

They were asked to state their level of agreement –a lot, quite a bit, a little or not at all- with four questions that make it possible to get an idea of how adequate the enforcement of this Act is by the bodies of the Administration and compliance with the law by people. In the responses, one can see the agreement and differences of opinion existing with respect to the four factors analyzed.

| | | “To what degree do you agree with each of the following statements...?” | | | | | |
|--------------------------------------------------------------------|------|-------------------------------------------------------------------------|-------------|----------|------------|---------------|-------------|
| | | A lot | Quite a bit | A little | Not at all | Does not know | No response |
| Most smokers comply with the Tobacco Act | 2006 | 7.8 | 38.2 | 31.7 | 16.2 | 5.8 | 0.4 |
| | 2007 | 8.9 | 32.8 | 33.6 | 19.7 | 4.5 | 0.4 |
| | 2008 | 7.8 | 36.1 | 33.6 | 17.9 | 4.2 | 0.4 |
| | 2009 | 6.2 | 31.7 | 36.5 | 21.4 | 4 | 0.2 |
| | 2010 | 5.4 | 31.9 | 37.3 | 20 | 5.2 | 0.2 |
| Non-smoker suffer fewer annoyances now than before the Act existed | 2006 | 11.2 | 47.3 | 25.9 | 9.2 | 6 | 0.5 |
| | 2007 | 12 | 44.4 | 26.7 | 10.6 | 5.6 | 0.6 |
| | 2008 | 10.5 | 46.9 | 27.3 | 9.4 | 5.3 | 0.6 |
| | 2009 | 9.6 | 42.6 | 31.2 | 10.8 | 5.5 | 0.3 |
| | 2010 | 8.1 | 44.2 | 30.3 | 10.8 | 6.1 | 0.5 |
| Thanks to the Tobacco Act, people smoke less everywhere | 2006 | 8.5 | 45.6 | 27.9 | 11.8 | 5.9 | 0.4 |
| | 2007 | 10.7 | 41.4 | 28.8 | 13 | 5.4 | 0.7 |
| | 2008 | 9 | 43.5 | 30.2 | 11.8 | 5.1 | 0.5 |
| | 2009 | 7.8 | 38.7 | 34.1 | 13.9 | 4.9 | 0.6 |
| | 2010 | 6.2 | 41.8 | 31.8 | 13.4 | 6 | 0.8 |
| The Tobacco Act should be made even tougher | 2006 | 9.7 | 24.3 | 22.8 | 33.3 | 9.3 | 0.6 |
| | 2007 | 16.8 | 24.9 | 21.1 | 28.2 | 7.9 | 1.2 |
| | 2008 | 17.1 | 27.3 | 21.7 | 25.3 | 7.9 | 0.7 |
| | 2009 | 19.4 | 28 | 21 | 23.2 | 7.4 | 1 |
| | 2010 | 19.6 | 28.5 | 21.1 | 22.3 | 7.7 | 0.7 |

37.3% of all people express their agreement that *the Act is complied with a lot or quite a bit*, while 57.3% agree little or not at all that most smokers adhere to and comply with this Act. Both results are practically the same as in 2009, in terms of the percentage agreement and disagreement about compliance with the Act.

| With the statement “Most smokers comply with the Tobacco Act” people agree... | | | | | | | | | | |
|-------------------------------------------------------------------------------|---------------------|------|------|------|------|-----------------------|------|------|------|------|
| | A lot + Quite a bit | | | | | A little + Not at all | | | | |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Overall average | 46 | 41.7 | 43.9 | 37.9 | 37.3 | 47.9 | 53.3 | 51.5 | 57.9 | 57.3 |

In 2010, the percentage of people who agree a lot or quite a bit that *non-smoker suffer fewer annoyances than they did before the Act existed* (52.3%) was higher (by 11.2 points) than that of those who state their disagreement with this statement (41.1%).

The percentage in agreement being practically alike, that of disagreement is lower (0.9 points).

| With the statement “Non-smokers suffer fewer annoyances now than they did before the Act,” people agree... | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------|---------------------|------|------|------|------|-----------------------|------|------|------|------|
| | A lot + Quite a bit | | | | | A little + Not at all | | | | |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Overall average | 58.5 | 56.4 | 57.4 | 52.2 | 52.3 | 35.1 | 37.1 | 36.7 | 42 | 41.1 |

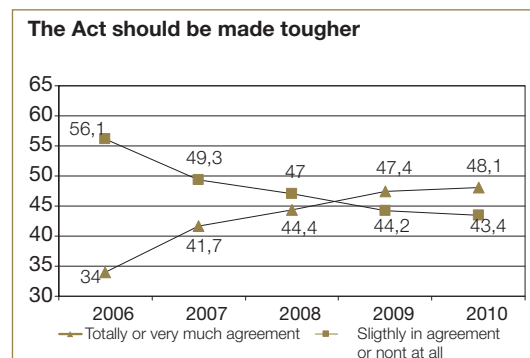
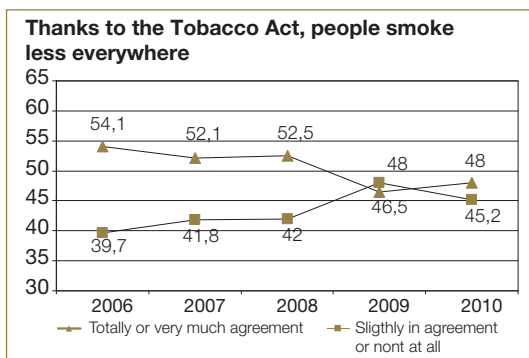
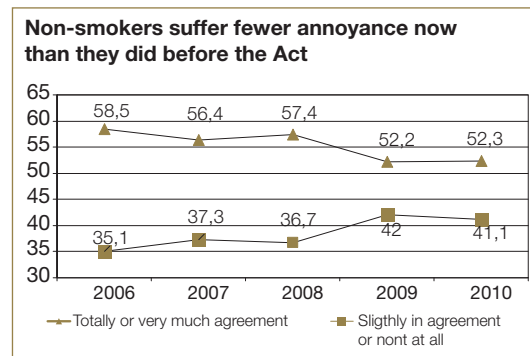
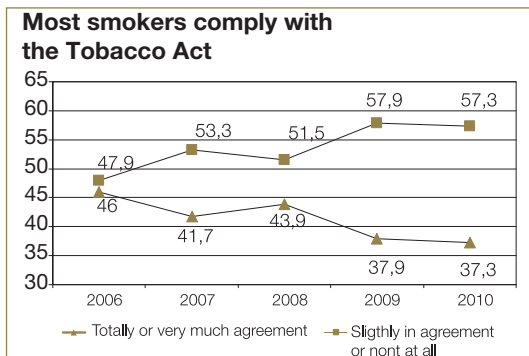
Unlike in prior years, in 2010 the percentage of people who believe that *thanks to the Act people smoke less everywhere* (48%) is bigger than that of those who express their disagreement with this claim (45.2%). Unlike the results in 2009, this year there is more agreement than disagreement that people smoke less. The same thing occurred during the first 3 years in which this question was posed (2006 through 2008).

| With the statement “Thanks to the Tobacco Act, people smoke less everywhere,” people agree... | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------|---------------------|------|------|------|------|-----------------------|------|------|------|------|
| | A lot + Quite a bit | | | | | A little + Not at all | | | | |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Overall average | 54.1 | 52.1 | 52.5 | 46.5 | 48 | 39.7 | 41.8 | 42 | 48 | 45.2 |

In this edition, 48.1% of all people state their agreement that *the Act should be made tougher*, an opinion which in 2006 was shared by 34%; since then, it has increased year after year. In a parallel manner, the opposite stance, against making the Act tougher, has fallen from 56.1% in 2006 to 43.4% in 2010.

| With the statement “The Act should be made tougher,” people agree... | | | | | | | | | | |
|----------------------------------------------------------------------|---------------------|------|------|------|------|-----------------------|------|------|------|------|
| | A lot + Quite a bit | | | | | A little + Not at all | | | | |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Overall average | 34 | 41.7 | 44.4 | 47.4 | 48.1 | 56.1 | 49.3 | 47 | 44.2 | 43.4 |

Using the results of the answers to the questions regarding the use and consumption of tobacco, which have been included in the questionnaire in the last five editions of the Health Barometer, four graphs have been created which make it possible to see the changes which have occurred in the people's opinions. In the graphs, one can see notable change, despite the time frame being just 5 years.



The graphs show the changes which took place in the opinions people have about the consequences of tobacco use over the period of 2006-2010.

The most noteworthy changes are as follows:

In 2010, nearly 6 out of every 10 people (57.3%) express their disagreement with the idea that *most smokers comply with the Act*, which means that over just 4 years dissent has increased by 9.4 percentage points. Moreover, the percentage of people who agree that most smokers comply with the Act (37.3%) has decreased by 8.7 points compared with 2006 (46%). Therefore, the difference between the percentages who agree and disagree about the Act being complied with has shifted from being just 1.1 points (2006) to 20 points (2010).

The percentage of people who believe that *non-smokers suffer fewer annoyances now than they did before the Act existed* has fallen by 6.2 points from 2006 to 2010, from 58.5% of people who believed it to 52.3%. On the other hand, during this period disagreement rose by 6 points, from 35.1% in 2006 to 41.1% in 2010. In other words, the difference of 23.4 points that existed in 2006, between those who agreed

and those who expressed disagreement, has fallen by more than half, until reaching 11.2 points in 2010.

48% of people are in agreement that *people smoke less everywhere* since the year 2005 Act took force, a higher percentage than those who do not agree with this statement (45.2%).

In 2006, the difference between the percentages in agreement and disagreement was 14.4 points; in 2010 it was just 2.8 points. In other words, in the 5 years that the Act has been in force, the percentage of people who think that people smoke less has fallen as much as the percentage of those who have the opposite opinion, that people do not smoke less, has increased (even though the Act has been in force).

Last of all, the results of the responses by people to the four question are noteworthy, regarding how much they agree with the appropriateness of making Act 25/2005 even tougher. The corresponding graph shows the trends in the responses in a very demonstrative manner.

Over the time period of 2006-2010, the percentage of people who expressed their agreement with making this Act tougher has grown in an ongoing manner: from 34% agreement in 2006 to 48.1% in 2010, for an increase of 14.1 points. In turn, disagreement is dropping, having fallen by 12.7 points, from 56.1% the first year to 43.3% in 2010.

In other words, the people would undoubtedly show a favourable opinion towards the appropriateness of making the provisions to fight against tobacco use more severe.

11. Alcohol and youth

Also in this edition, the questionnaire included a question about what the degree of consensus would be over the passage of a law which establishes measures to keep minors under the age of 18 years from consuming alcohol.

The people show a level of agreement of 8.74 points with the possibility of enacting a law which has the aforementioned purpose.

Women show a higher level of agreement, at 9.01, than men, at 8.46.

“How much would you agree with a law that created measures to keep minors under the age of 18 years from consuming alcohol?” Each person interviewed indicates their level of agreement on a scale from 1 “total disagreement” to 10 “total agreement”

| | Total | Women | Men |
|------|--------------|--------------|------------|
| 2007 | 8.33 | 8.60 | 8.05 |
| 2008 | 8.57 | 8.87 | 8.35 |
| 2009 | 8.59 | 8.84 | 8.34 |
| 2010 | 8.74 | 9.01 | 8.46 |

The results of this question over the four years in which it has been included in the Barometer show an increasing trend in terms of the agreement which people express about the appropriateness of creating legal measures to keep minors under the age of 18 years from consuming alcohol.

12. Healthy diet

At the request of the Spanish Agency for Food Safety and Nutrition, this edition of the Health Barometer included 4 questions to examine whether people in their workplace eat in a healthy manner and whether they carry out physical activity. These questions were posed only to those who were currently employed in a job when the interviews were held, which was 44.2% of all those interviewed. The question was not posed to retirees, pensioners, the unemployed or students.

| <i>"In your workplace, are healthy eating habits promoted?"</i> | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|
| | 2010 |
| Yes | 30 |
| No | 67.5 |
| Does not know what the question means (*) | 0.9 |
| Does not know - No response | 1.7 |
| (*) This response is not provided by the survey-takers but is included when the interviewee gives it as a spontaneous response. | |

Those who responded that they are promoted were asked in what way healthy eating habits are promoted.

| <i>"Which of the following activities are carried out to promote the habit of healthy eating?"</i> | |
|----------------------------------------------------------------------------------------------------|-------------|
| Multiple response | 2010 |
| Vending machines which contains healthy food choices | 21.5 |
| Recommendations on healthy snacks and/or meals | 37.4 |
| Talks or informational materials (at work, on website, brochures, etc.) | 39.2 |
| Others | 26.6 |
| No response | 3.7 |

| <i>"In your workplace, is any sort of activity carried out to promote physical activity?"</i> | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|
| | 2010 |
| Yes | 15.1 |
| No | 79 |
| Does not know what the question means (*) | 0.5 |
| Does not know - No response | 5.3 |
| (*) This response is not provided by the survey-takers but is included when the interviewee gives it as a spontaneous response. | |

And those who answer that physical activities are performed at their workplace were asked what type of activity they have.

| <i>“Which of the following activities are carried out to promote physical activity?”</i> | |
|------------------------------------------------------------------------------------------|-------------|
| Multiple response | 2010 |
| There are facilities for carrying out these activities within the workplace itself | 44.5 |
| Time for performing physical activity during the working day | 22.5 |
| Payment of all or part of the use of facilities, or discounts on their use | 16.6 |
| Organization of sporting events or competitions | 37.5 |
| Others | 28.6 |
| Does not know – No response | 2.7 |

13. Use of health care services in an autonomous region other than that of residence

8 out of every 100 people (7.6%) state that in the last 12 months they needed to go to a public health care centre while they were outside of the Autonomous Region where they normally reside.

The services which were most needed by the people who required health care while outside of the Autonomous Region where they normally reside were primary care doctor's visits (54.8%) and emergency services (32.9%), in proportions similar to those of prior years.

Those least requested were visits with specialist doctors (13.7%) and admittance into a hospital (3.6%)

| <i>"What services did you need?"</i> | | | | |
|-------------------------------------------|-------------|-------------|-------------|-------------|
| Multiple Response | 2007 | 2008 | 2009 | 2010 |
| An appointment with a primary care doctor | 52.5 | 52.1 | 52 | 54.8 |
| An appointment with a specialist | 12.7 | 12.7 | 12.8 | 13.7 |
| Care at an emergency service | 38 | 36.9 | 37.2 | 32.9 |
| A hospital stay of more than one day | 4.6 | 3.4 | 6.5 | 3.6 |
| Other | 1.5 | 0.6 | 0.8 | 1.9 |
| Does not know - No response | 1.9 | 7.3 | 3.3 | 3.7 |

93.6 percent of the people surveyed say that they have the health card of their Autonomous Region, and 5.8% that they do not.

Given the wide range of cards which are used and distributed for health care services, and a certain confusion which exists among people, for this year 2010 edition of the Barometer, the Health Information Institute created an image with all of the official health cards of the Autonomous Regional Administrations, so that each interviewer could show it while this question was asked, to facilitate answers and improve the quality of the results. Upon showing this image in each interview, the percentage who responded "*I do not have the card of this Autonomous Region*" (5.8%) went down when compared with the preceding edition of the survey (8.4%).

In most Autonomous Regions, the percentage of people who respond that "they do not have a health card" is lower than 5 percent, though in some it is as high as 11.54 percent.

Those who answered that they did not have their Autonomous Region's card (5.8%) were asked whether they had one from another Autonomous Region. 14.1% of them said they did (0.82 percent of the total number of people who took part in the survey).

14. Mistakes or errors in health care

In this edition of the Health Barometer, the people's perception of the errors and mistakes that may take place in health care was also examined¹.

| <i>"How often do you read or hear news about mistakes or errors being made in health care?"</i> | | | | | | |
|-------------------------------------------------------------------------------------------------|-------|-------|------|-------|-------|------|
| | 2009 | | | 2010 | | |
| | Total | Women | Men | Total | Women | Men |
| Very often | 10.1 | 11.4 | 8.8 | 9.2 | 10.8 | 7.6 |
| Quite often | 32.6 | 34.2 | 31 | 31.3 | 34 | 28.6 |
| A few times | 51.9 | 49.1 | 54.8 | 53.8 | 50.1 | 57.6 |
| Never | 3.9 | 3.8 | 4 | 4 | 3.7 | 4.3 |
| Does not know | 1.5 | 1.4 | 1.5 | 1.6 | 1.4 | 1.9 |
| No response | | | | | | |

More than half of all people –53.8%– say that they read or hear news about mistakes or errors in health care practice just a few times.

In this edition, 40.5% of the people state that they read or hear news of this type *very often or quite often*, a perception which has decreased in the last three years: in 2008 it was mentioned by 46% of the people and in 2009 by 42.7%.

As occurred in the year 2008 and 2009 edition, in this edition, as well, the percentage of women (44.8%) is greater than that of men (36.2%) who state that they read or listen to news about health care mistakes and errors *very often or quite often*.

| <i>"And, in Spain, which would you say takes place in health care...?"</i> | | | | | | |
|----------------------------------------------------------------------------|-------|-------|------|-------|-------|------|
| | 2009 | | | 2010 | | |
| | Total | Women | Men | Total | Women | Men |
| Many errors | 7.9 | 8.7 | 7.2 | 6.2 | 7.1 | 5.4 |
| Quite a few errors | 30.6 | 33.3 | 27.7 | 30.2 | 33.2 | 27 |
| Few + very few errors | 53.7 | 49.6 | 58 | 55.1 | 50.7 | 59.5 |
| Does not know – | | | | | | |
| No response | 7.8 | 8.5 | 7.2 | 8.5 | 8.9 | 8.1 |

¹We must point out the unique difficulty which exists in measuring the perception people have of the mistakes and errors which take place in medical and/or nursing care work, because of both the concern and sensitivity which they produce and the important personal and family-related repercussions to which they lead in many cases, as well as the wide range of events and complexity of circumstances to which reference may be made when speaking of health care errors or mistakes.

36.4% of the survey takers believe that there are a *lot of or quite a few errors*, a percentage which is 2.1 points lower than in 2009 (38.5%). Also in 2010, the percentage of women who have this perception (40.3%) was lower than that of men (32.4%) who also stated this; the result is identical to that of prior years.

In a necessary correspondence with the preceding result, the percentage of men (67.6%) is greater than that of women (56.9%) who state that there are *few or very few errors* in health care.

| <i>“And do you believe that the number (quantity) of mistakes and errors in Spain’s health care systems represents a problem that is.....?”</i> | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|------|-------|-------|------|
| | 2009 | | | 2010 | | |
| | Total | Women | Men | Total | Women | Men |
| Very important | 21.5 | 22.9 | 20.1 | 20.7 | 22.9 | 18.4 |
| Quite important | 38.7 | 39.6 | 37.7 | 39.2 | 40.3 | 38.2 |
| Not very + not at all important | 32.5 | 29.1 | 36.1 | 31.8 | 27.9 | 35.9 |
| Does not know - No response | 7.3 | 8.4 | 6.2 | 8.2 | 8.9 | 7.5 |

For 6 out of every 10 people (59.9%), the number of mistakes and errors which take place represents a *very or quite important* problem for the Spanish health care system as a whole; this rate is similar to that of 2009 (60.2%) and identical to that of 2008 (59.9%).

Women (63.2) at a higher rate than men (56.6%) believe that the number of mistakes or errors which are produced constitute a *very or quite important* problem for Spain’s health care system.

When examining the real experience that people have had in terms of errors in health care, the vast majority (from 88 to 92 percent) state that neither they nor their family have ever suffered any such errors when receiving care at the different levels within the system.

Approximately 1 out of every 10 people state that they or some family member have suffered some type of error when they were provided with care by specialists or during admittance at a hospital, and to a lesser degree in primary care and emergency services.

| <i>“Have you or has someone in your family suffered from some type of error in the health care you received through ...?”</i> | | | |
|-------------------------------------------------------------------------------------------------------------------------------|------|------|-------------|
| | YES | NO | No response |
| Primary care | 9.6 | 90 | 0.4 |
| A specialist | 11.7 | 87.8 | 0.5 |
| A hospital admittance | 11.5 | 88 | 0.5 |
| An emergency care service | 8 | 91.5 | 0.6 |

For that ten percent of people who had suffered from some error, the most serious problems took place during admittance to a hospital, given that 84.2% claim to have been affected in a *very serious or quite serious* manner at that level of the system.

This perception of serious harm is lower at other levels of health care: in primary care (71.9%), in visits to specialists (74.6%) and in emergency services (77.2%).

“And did this error affect your health or your family’s health in a very serious, fairly serious, not very serious or not at all serious manner?”

| | Very serious | Fairly serious | Not very serious | Not at all serious | No response |
|---------------------------|--------------|----------------|------------------|--------------------|-------------|
| Primary care | 31.7 | 40.2 | 22.1 | 4.7 | 1.3 |
| A specialist | 36.5 | 38.1 | 20.5 | 3.4 | 1.5 |
| A hospital admittance | 49.6 | 34.6 | 11.9 | 2.2 | 1.7 |
| An emergency care service | 40.1 | 33.1 | 22.9 | 2.2 | 1.8 |

In turn, 84.3 percent of the people state that they feel a *high or quite high level of trust* in the work done by doctors, practically the same level of trust in the work done by nursing professionals (83.4 percent) and slightly less (78.2%) for all other health care professionals.

The degree of trust women and men express in the work performed by different health care professionals –doctors, nurses and other staff- is practically the same.

“Of the different professionals who provide services in our health care system, could you tell me to what degree you trust that they are doing their work properly, choosing from a high, quite high, low or very low level of trust?”

| | Medical staff | Nursing staff | Other health care staff |
|----------------------------------|---------------|---------------|-------------------------|
| High + quite high level of trust | 84.3 | 83.4 | 78.2 |
| Little + no trust | 13.2 | 14 | 16.4 |
| Does not know - No response | 2.5 | 2.6 | 5.5 |

15. The people's greatest areas of interest

When asked the question regarding the social topics which they consider to be of the greatest interest, in this year 2010 edition once again, the people unmistakably state that to them *Health Care* is the topic of the greatest importance (29.2%). The same result was found in all previous years.

The second topic of interest is *Education* this year, as well (22.7%).

Unlike prior years, *Pensions* (14.1%) were ranked third, whereas *Housing* fell into fourth place (13.5%) after having been ranked second or third in the past. Perhaps this greater concern or interest in *Pensions* is not unrelated to the social, labour-related and media debate (delaying the retirement age, pension reform, etc.) taking place in Spanish society for months now and still very much a current topic of lively discussion.

One notable difference compared with prior years is the gradual decrease in importance held by *Public Safety*. In 2010, this was the topic of greatest interest to 7.8% of all people, whereas in 2006 it was for 13%.

| <i>Which of the following topics do you consider to be of greatest interest to the people?</i> | | | | | | |
|------------------------------------------------------------------------------------------------|------|------|------|------|------|------|
| | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 |
| Defence | 0.8 | 1.2 | 1 | 0.9 | 1.1 | 1.1 |
| Education | 19.5 | 18.8 | 20.1 | 20.2 | 21.1 | 22.7 |
| Health Care | 30.3 | 28.3 | 28.3 | 28.1 | 29 | 29.2 |
| Housing | 20.1 | 20.1 | 20.3 | 20.3 | 17.2 | 13.5 |
| Pensions | 10.4 | 9.7 | 10.1 | 11.6 | 11.3 | 14.1 |
| Transportation | 0.6 | 0.7 | 0.9 | 0.7 | 0.8 | 0.8 |
| Public Safety | 10 | 13.1 | 11.7 | 10.1 | 9.7 | 7.8 |
| Other areas of Social Services | 3.6 | 4.1 | 3.5 | 4.1 | 5.4 | 5.7 |
| Does not know - No response | 4.7 | 4 | 4.1 | 4.1 | 4.3 | 5.2 |

16. Technical information

- Scope of study: National, including the Cities of Ceuta and Melilla
- Size of designed sample: 7,800, broken down into three sub-samples with 2,600 interviews each.
- Size of sample completed: 7,750 interviews [2,594 in the 1st wave; 2,586 in the 2nd wave and 2,570 in the 3rd wave).
- Weighting: weighting coefficients were applied to deal with the sample as a whole, because the sampling rates were different in each Autonomous Region.
- Sampling error: the sample set is significant at the national level, with a sampling error of $\pm 1\%$ for a confidence level of 95.5%.
- The field work was performed as follows: the 1st wave, 10-18 March 2010; the 2nd wave, 11-22 June 2010 and the 3rd wave, from 22 October to 2 November 2010.

17. Annex: Questionnaire

CIS

Centro de Investigaciones Sociológicas

Departamento de Investigación

BARÓMETRO SANITARIO – Año 2010

| | | | | |
|---------------------------------------|----------------------|------------------|-----------------------|----------------------|
| Comunidad Autónoma _____ | <input type="text"/> | (10)(11) | Nº ESTUDIO | Nº CUESTIONARIO |
| Provincia _____ | <input type="text"/> | (12)(13) | 2.832 - 2.839 y 2.850 | <input type="text"/> |
| Municipio _____ (nombre municipio) | <input type="text"/> | (14)(15)(16) | (1)(2)(3)(4) | (5)(6)(7)(8)(9) |
| Tamaño de hábitat _____ | <input type="text"/> | (17)(18) | | |
| Distrito _____ | <input type="text"/> | (19)(20) | OLEADA <u>3ª</u> | (28) |
| Sección _____ | <input type="text"/> | (21)(22)(23) | | |
| Entrevistador/a _____ | <input type="text"/> | (24)(25)(26)(27) | | |

Buenos días/tardes. El Centro de Investigaciones Sociológicas y el Ministerio de Sanidad y Política Social está realizando un estudio sobre los servicios sanitarios públicos y de atención al ciudadano/a. Por este motivo solicitamos su colaboración y se la agradecemos anticipadamente. Esta vivienda ha sido seleccionada al azar mediante métodos aleatorios. Le garantizamos el absoluto anonimato y secreto de sus respuestas en el más estricto cumplimiento de las Leyes sobre secreto estadístico y protección de datos personales. Una vez grabada la información de forma anónima, los cuestionarios individuales son destruidos inmediatamente.

| <p>P.1 Para empezar, ¿podría decirme cuál de las siguientes áreas que le voy a leer es la que considera Ud. de mayor interés para los ciudadanos y las ciudadanas? (UNA RESPUESTA). (MOSTRAR TARJETA A).</p> <ul style="list-style-type: none"> - Defensa 01 - Educación 02 - Sanidad 03 - Vivienda 04 - Pensiones 05 (29)(30) - Transportes 06 - Seguridad ciudadana 07 - Servicios sociales 08 - N.S. 98 - N.C. 99 | <p>P.4 Después de la aplicación de la Ley del Tabaco, ¿en qué grado está Ud. de acuerdo con cada una de las siguientes afirmaciones: mucho, bastante, poco o nada?</p> <table border="1"> <thead> <tr> <th></th> <th colspan="5">Bas-</th> <th></th> </tr> <tr> <th></th> <th>Mucho</th> <th>tante</th> <th>Poco</th> <th>Nada</th> <th>NSNC</th> <th></th> </tr> </thead> <tbody> <tr> <td>- La mayoría de los fumadores respeta la Ley del Tabaco .</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>8</td> <td>9 (34)</td> </tr> <tr> <td>- Los no fumadores sufren ahora menos molestias que antes de existir la Ley</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>8</td> <td>9 (35)</td> </tr> <tr> <td>- Con la Ley del Tabaco, se fuma menos en todos los sitios</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>8</td> <td>9 (36)</td> </tr> <tr> <td>- Habría que endurecer más la Ley</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>8</td> <td>9 (37)</td> </tr> </tbody> </table> | | Bas- | | | | | | | Mucho | tante | Poco | Nada | NSNC | | - La mayoría de los fumadores respeta la Ley del Tabaco . | 1 | 2 | 3 | 4 | 8 | 9 (34) | - Los no fumadores sufren ahora menos molestias que antes de existir la Ley | 1 | 2 | 3 | 4 | 8 | 9 (35) | - Con la Ley del Tabaco, se fuma menos en todos los sitios | 1 | 2 | 3 | 4 | 8 | 9 (36) | - Habría que endurecer más la Ley | 1 | 2 | 3 | 4 | 8 | 9 (37) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------|------|------|--------|----|----|----|------------------|------------------|---------------|------|------|----|-----------------------------------------------------------|----|----|----|----|----|--------|-----------------------------------------------------------------------------------|----|----|----|----|---|--------|------------------------------------------------------------------|---|---|---|---|---|--------|-----------------------------------------|---|---|---|---|---|--------|
| | Bas- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Mucho | tante | Poco | Nada | NSNC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - La mayoría de los fumadores respeta la Ley del Tabaco . | 1 | 2 | 3 | 4 | 8 | 9 (34) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Los no fumadores sufren ahora menos molestias que antes de existir la Ley | 1 | 2 | 3 | 4 | 8 | 9 (35) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Con la Ley del Tabaco, se fuma menos en todos los sitios | 1 | 2 | 3 | 4 | 8 | 9 (36) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - Habría que endurecer más la Ley | 1 | 2 | 3 | 4 | 8 | 9 (37) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>P.2 Vamos a centrarnos ahora en el tema de la sanidad. De las siguientes afirmaciones que aparecen en esta tarjeta, ¿cuál expresa mejor su opinión sobre el sistema sanitario en nuestro país? (MOSTRAR TARJETA B).</p> <ul style="list-style-type: none"> - En general, el sistema sanitario funciona bastante bien 1 - El sistema sanitario funciona bien, aunque son necesarios algunos cambios 2 - El sistema sanitario necesita cambios fundamentales, aunque algunas cosas funcionan 3 (31) - Nuestro sistema sanitario está tan mal que necesitaríamos rehacerlo completamente 4 - N.S. 8 - N.C. 9 | <p>P.5 ¿Cuál sería su grado de acuerdo con una ley que estableciera medidas para que los y las menores de 18 años no consumieran alcohol? Sitúese en una escala de 1 a 10, donde el 1 significa su total desacuerdo y el 10 su total acuerdo. (MOSTRAR TARJETA D).</p> <p style="text-align: right;">(38)(39)</p> <table border="1"> <thead> <tr> <th colspan="10">Total desacuerdo</th> <th colspan="2">Total acuerdo</th> <th>NS</th> <th>NC</th> </tr> <tr> <th>01</th> <th>02</th> <th>03</th> <th>04</th> <th>05</th> <th>06</th> <th>07</th> <th>08</th> <th>09</th> <th>10</th> <th>98</th> <th>99</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td> <td></td><td></td> </tr> </tbody> </table> | Total desacuerdo | | | | | | | | | | Total acuerdo | | NS | NC | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 | 98 | 99 | | | | | | | | | | | | | | | | |
| Total desacuerdo | | | | | | | | | | Total acuerdo | | NS | NC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 | 98 | 99 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>P.3 ¿Está Ud. satisfecho/a o insatisfecho/a con el modo en que el sistema sanitario público funciona en España? Para contestarme, utilice esta escala en la que el 1 significa que está Ud. muy insatisfecho/a y el 10 que está muy satisfecho/a. (MOSTRAR TARJETA C).</p> <p style="text-align: right;">(32)(33)</p> <table border="1"> <thead> <tr> <th colspan="10">Muy insatisfecho/a</th> <th colspan="2">Muy satisfecho/a</th> <th>NS</th> <th>NC</th> </tr> <tr> <th>01</th> <th>02</th> <th>03</th> <th>04</th> <th>05</th> <th>06</th> <th>07</th> <th>08</th> <th>09</th> <th>10</th> <th>98</th> <th>99</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td> <td></td><td></td> </tr> </tbody> </table> | Muy insatisfecho/a | | | | | | | | | | Muy satisfecho/a | | NS | NC | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 | 98 | 99 | | | | | | | | | | | | | | | | | |
| Muy insatisfecho/a | | | | | | | | | | Muy satisfecho/a | | NS | NC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 | 98 | 99 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

P.6 Le voy a leer una serie de motivos por los que la gente puede elegir un servicio sanitario público o uno privado. En su caso particular, y siempre en el caso de que Ud. pudiese elegir, ¿elegiría un servicio sanitario público o uno privado teniendo en cuenta...?

| | (NO LEER) | | | | |
|--------------------------------------------------------------|-----------|---------|-------|----|------|
| | Público | Privado | Ambos | NC | |
| - La tecnología y los medios de que dispone | 1 | 2 | 3 | 9 | (40) |
| - La capacitación de los médicos y las médicas | 1 | 2 | 3 | 9 | (41) |
| - La capacitación de los enfermeros y las enfermeras | 1 | 2 | 3 | 9 | (42) |
| - La rapidez con que le atienden .. | 1 | 2 | 3 | 9 | (43) |
| - La información que recibe sobre su problema de salud | 1 | 2 | 3 | 9 | (44) |
| - El trato personal que Ud. recibe .. | 1 | 2 | 3 | 9 | (45) |
| - El confort de las instalaciones ... | 1 | 2 | 3 | 9 | (46) |

P.7 Si pudiera elegir y Ud. o algún miembro de su familia tuviera una enfermedad grave, ¿a dónde acudiría, a un servicio sanitario público o a uno privado?

- Servicio sanitario público 1
- Servicio sanitario privado 2
- (NO LEER) Ambos 3 (47)
- N.S. 8
- N.C. 9

P.8 Si Ud. o algún miembro de su hogar tuvieran que utilizar un servicio sanitario y Ud. pudiera elegir, ¿acudiría a un centro público o privado, cuando se tratara de...?

| | (NO LEER) | | | | |
|--------------------------------------------------------------------------------------------|-----------|---------|-------|----|------|
| | Público | Privado | Ambos | NC | |
| - Atención primaria (consultas de médicos/as de cabecera (o de familia) y pediatría) | 1 | 2 | 3 | 9 | (48) |
| - Asistencia especializada (consultas de especialistas, salvo de urgencias) | 1 | 2 | 3 | 9 | (49) |
| - Ingreso en hospital | 1 | 2 | 3 | 9 | (50) |
| - Urgencias | 1 | 2 | 3 | 9 | (51) |

P.9 ¿Tiene Ud. derecho a la asistencia sanitaria a través de... (MOSTRAR TARJETA E).

- La sanidad pública 1
- Una mutualidad (MUFACE, MUGEJU, ISFAS) en la que Ud. o la persona titular ha elegido ser atendido por la sanidad pública 2 (52)
- Una mutualidad (MUFACE, MUGEJU, ISFAS) en la que Ud. o la persona titular ha elegido ser atendido por una sociedad médica privada 3
- No tengo derecho por ninguna de las vías anteriores 4
- N.S. 8
- N.C. 9

P.10 ¿Tiene Ud. tarjeta sanitaria de esta Comunidad Autónoma? (No nos referimos a Cartilla de la Seguridad Social). (MOSTRAR TARJETA SANITARIA COMUNIDAD AUTÓNOMA).

- Sí 1
- No 2 (53)
- N.S. 8
- N.C. 9

ENTREVISTADOR/A: ¿Ha utilizado la persona entrevistada esta tarjeta?

- Sí 1
- No 2 (54)

P.10a ¿Y de otra Comunidad Autónoma?

- Sí 1
- No 2 (55)
- N.C. 9

P.10b ¿De cuál? (MOSTRAR TARJETA SANITARIA COMUNIDADES AUTÓNOMAS AGRUPADAS).

..... (56)(57)

N.C. 99

P.11 ¿En los últimos doce meses, estando fuera de su Comunidad Autónoma de residencia, ha necesitado acudir a un centro sanitario público? (ENTREVISTADOR/A: Si contesta "no he salido de mi comunidad autónoma", redondear "no").

- Sí 1
- No 2 (58)
- N.C. 9

P.11a ¿Qué servicios necesitó? (RESPUESTA MÚLTIPLE)

- Una consulta con un médico una médica de atención primaria 1 (59)
- Una consulta con un especialista 1 (60)
- Atención en un servicio de urgencias 1 (61)
- Una estancia hospitalaria de más de un día 1 (62)
- Otros 1 (63)
- N.C. 1 (64)

P.12 Por su propia experiencia o por la idea que Ud. tenga, me gustaría que valorase los siguientes servicios sanitarios públicos. Para contestar, utilice por favor una escala de 1 a 10, en la que el 1 significa que le parece "totalmente insatisfactorio" y el 10 "totalmente satisfactorio." (MOSTRAR TARJETA F).

| | Escala | | |
|-------------------------------------------------------------------------------------------------------------|--------|----|----------|
| | 01 | 10 | NSNC |
| - Atención primaria (consulta de médico/a de cabecera (o de familia) y pediatría) en centros de salud | 98 | 99 | (65)(66) |
| - Atención especializada (consultas de especialistas en centros públicos) | 98 | 99 | (67)(68) |
| - Urgencias en hospitales públicos | 98 | 99 | (69)(70) |
| - Ingreso y asistencia en hospitales públicos | 98 | 99 | (71)(72) |

P.13 Durante los últimos doce meses, ¿ha acudido Ud. a la consulta de un médico o una médica de cabecera (o de familia) para una verdadera consulta, es decir, no para pedir una cita, hacerse una radiografía, un análisis u otra prueba, ni para acompañar a otra persona?

- Sí 1
 - No 2
 - No recuerda 3
 - N.C. 9
- (73) **Pasar a P.17**

P.13a Y durante estos últimos doce meses, ¿puede recordar cuántas veces acudió a un médico o a una médica de cabecera (o de familia) de la sanidad pública? ¿Y cuántas a uno privado o una privada?

| Nº de veces | Público | Privado | Si ha acudido exclusivamente a uno/a privado/a, pasar a P.17 |
|-------------------|----------|----------|--------------------------------------------------------------|
| | (74)(75) | (76)(77) | |
| Ninguna | 97 | 97 | |
| No recuerda | 98 | 98 | |
| N.C. | 99 | 99 | |

ENTREVISTADOR/A: P.13b a P.16a SÓLO PARA QUIENES HAN ACUDIDO A UN MÉDICO O UNA MÉDICA DE CABECERA (O DE FAMILIA DE LA SANIDAD PÚBLICA EN P.13a).

P.13b En general, la atención que ha recibido en las consultas del médico o de la médica de cabecera (o de familia) de la sanidad pública ha sido....

- Muy buena 1
- Buena 2
- Regular 3 (78)
- Mala 4
- Muy mala 5
- N.S. 8
- N.C. 9

P.13c Y respecto de lo que Ud. esperaba, esta atención ha sido....

- Mucho mejor 1
- Mejor 2
- Más o menos igual 3
- Peor 4 (79)
- Mucho peor 5
- N.S. 8
- N.C. 9

P.14 Cuando pide cita con el médico o la médica de su centro de salud para ir en el mismo día, se la dan....

- Siempre 1
- Casi siempre 2
- Casi nunca 3 (80)
- Nunca 4
- **(NO LEER)** No procede, no hay un sistema de citas 5
- N.C. 9

P.14a La última vez que pidió cita, ¿con cuántos días se la dieron? **(ENTREVISTADOR/A: Si la persona entrevistada contesta un periodo de días, recoger el número de días más alto).**

Días (81)(82)

No recuerda 98

N.C. 99

P.15 ¿Recuerda si eligió Ud. (o alguien de su familia por Ud.) el médico o la médica de cabecera (o de familia) o si se lo asignaron en el centro de salud?

- Lo eligió Ud (o alguien de su familia por Ud.) 1
- Se lo asignaron en el centro de salud 2 (83)
- No recuerda 7
- N.S. 8
- N.C. 9

P.16 ¿En alguna ocasión ha querido cambiar de médico o médica de cabecera o de familia?

- Sí 1
- No 2 (84)
- N.C. 9

P.16a Y ¿lo consiguió? **(ENTREVISTADOR/A: Si lo ha intentado varias veces, referir la pregunta a la última ocasión).**

- Sí 1
- No 2 (85)
- N.C. 9

A TODAS LAS PERSONAS

P.17 Por su experiencia personal o por la idea que Ud. tenga, quisiera que valorase los siguientes aspectos de la asistencia sanitaria pública, referidos a la atención que se presta en las consultas de médico/a/s de cabecera (o de familia) y pediatría. Utilice para ello una escala de 1 a 10, en la que el 1 significa que lo valora como "totalmente insatisfactorio" y el 10 que lo valora como "totalmente satisfactorio". **(MOSTRAR TARJETA E). (LEER UNA A UNA LAS ALTERNATIVAS ROTANDO EL ORDEN EN CADA ENTREVISTA).**

| | Escala | | | |
|--------------------------------------------------------------------------------|---------|----|----|----------|
| | 01 – 10 | NS | NC | |
| 01 La cercanía de los centros de salud | 98 | 99 | | (86)(87) |
| 02 El horario de atención de la consulta | 98 | 99 | | (88)(89) |
| 03 El trato recibido del personal sanitario . . . | 98 | 99 | | (90)(91) |
| 04 La atención a domicilio por el personal médico y de enfermería | 98 | 99 | | (92)(93) |
| 05 El tiempo dedicado por el médico o la médica a cada enfermo o enferma | 98 | 99 | | (94)(95) |

Escala

↓

| | 01 – 10 | NS | NC | |
|----------------------------------------------------------------------------------------------------------|---------|----|----|------------|
| 06 El conocimiento del historial y seguimiento de los problemas de salud de cada usuario o usuaria | 98 | 99 | | (96)(97) |
| 07 La facilidad para conseguir cita | 98 | 99 | | (98)(99) |
| 08 La confianza y seguridad que transmite el médico o la médica | 98 | 99 | | (100)(101) |
| 09 El tiempo de espera hasta entrar en consulta | 98 | 99 | | (102)(103) |
| 10 Cuando lo necesita, el médico o la médica de cabecera le envía a un o a una especialista | 98 | 99 | | (104)(105) |
| 11 El equipamiento y medios tecnológicos existentes en los centros | 98 | 99 | | (106)(107) |
| 12 La información recibida sobre su problema de salud | 98 | 99 | | (108)(109) |
| 13 Los consejos del médico o de la médica sobre alimentación, ejercicio, tabaco, alcohol, etc. | 98 | 99 | | (110)(111) |
| 14 El tiempo que tarda el médico o la médica en verle desde que pide la cita | 98 | 99 | | (112)(113) |
| 15 El tiempo que se tarda en hacer las pruebas diagnósticas | 98 | 99 | | (114)(115) |
| Ítem por el que comienza | | | | (116)(117) |

P.18 Durante los últimos doce meses, ¿ha tenido Ud. que acudir a un centro sanitario público o privado por alguna urgencia, exceptuando las ocasiones en las que ha podido acompañar a otra persona?

- Sí 1
- No 2 **→ Pasar a P.19** (118)
- N.C. 9

P.18a En los últimos doce meses, ¿puede recordar cuántas veces acudió Ud. a un centro público para una urgencia? ¿Y cuántas a uno privado?

| | Público (119)(120) | Privado (121)(122) |
|-------------------|-----------------------|-----------------------|
| Nº de veces | 97 | 97 |
| Ninguna | 98 | 98 |
| No recuerda | 99 | 99 |

P.18b La última vez que tuvo Ud. alguna urgencia, ¿qué tipo de servicio utilizó? **(MOSTRAR TARJETA G).**

- Sólo un servicio de urgencias de atención primaria (no hospitalaria) público 1 **→ Pasar a P.18f**
- Sólo un servicio de urgencias de un hospital público 2
- Un servicio de urgencias de atención primaria (no hospitalaria) y un hospital, ambos públicos 3 (123)
- Un servicio de urgencias de atención primaria (no hospitalaria) privado y un hospital público 4
- **(NO LEER)** Otra respuesta..... 5 **→ Pasar a P.19**
- No recuerda 8
- N.C. 9

P.18c

↓

P.18c Cuando acudió Ud. al servicio de urgencias del hospital esta última vez, fue porque...

- Decidió Ud. ir directamente..... 1 (124)
- Le mandó su médico o médica de cabecera 2
- Le mandaron desde el servicio de urgencias de atención primaria 3 **→ Pasar a P.18e**
- Le mandó un médico o una médica privado o privada..... 4
- N.C..... 9

P.18d ¿Y cuál de las siguientes fue la razón principal por la que acudió a un servicio de urgencias de un hospital? **(MOSTRAR TARJETA H).**

- Porque no coincidía con el horario del médico o médica de cabecera (o de familia) 1
- Porque el centro donde pasa consulta mi médico o médica de cabecera (o de familia) y/o pediatra no tiene urgencias..... 2
- Porque no conozco los servicios de urgencias de atención primaria 3
- Porque en urgencias del hospital tienen más medios y resuelven mejor el problema 4 (125)
- Porque me habían dado cita muy tarde para ir a la consulta del o de la especialista por el problema de salud que tenía 5
- Porque estaba fuera de mi residencia habitual 6
- **(NO LEER)** Otra, ¿cuál?
- 7
- N.C..... 9

P.18e En esta última vez, ¿le ingresaron a Ud. en el hospital?

- Sí 1
- No 2 (126)
- N.C..... 9

ENTREVISTADOR/A: HACER P.18f y P.18g A TODAS LAS PERSONAS QUE HAYAN CONTESTADO 1, 2, 3 ó 4 en P.18b.

P.18f En relación con la atención sanitaria que recibió Ud. en la última urgencia, ¿cree Ud. que le atendieron con mucha rapidez, bastante, poca o ninguna rapidez?

- Mucha rapidez 1
- Bastante rapidez 2
- Poca rapidez 3
- Ninguna rapidez 4 (127)
- **(NO LEER)** De forma diferente 5
- No recuerda 8
- N.C..... 9

P.18g Y, ¿cree Ud. que le atendieron muy bien, bien, regular, mal o muy mal?

- Muy bien 1
- Bien 2
- Regular 3
- Mal 4
- Muy mal 5 (128)
- **(NO LEER)** De forma diferente 6
- No recuerda 8
- N.C..... 9

A TODAS LAS PERSONAS

P.19 En los últimos doce meses, ¿ha acudido Ud. a la consulta de un médico o una médica especialista, que no sea la del odontólogo o dentista? Nos referimos a una verdadera consulta, es decir, no para pedir una cita, hacerse una radiografía, un análisis u otra prueba, ni para acompañar a otra persona.

- Sí 1
- No 2 **→ Pasar a P.20 (129)**
- No recuerda 8
- N.C..... 9

P.19a Y durante estos últimos doce meses, ¿puede recordar cuántas veces acudió a un médico o una médica especialista en la sanidad pública? ¿Y cuántas a uno o una privado o privada?

| | <u>Público</u> (130)(131) | <u>Privado</u> (132)(133) | <i>Si ha acudido exclusivamente a uno/a privado/a, pasar a P.20</i> |
|-------------------|------------------------------|------------------------------|---------------------------------------------------------------------|
| Nº de veces | | | |
| Ninguna | 97 | 97 | |
| No recuerda | 98 | 98 | |
| N.C..... | 99 | 99 | |

ENTREVISTADOR/A: P.19b a P.19f SÓLO PARA QUIENES HAN ACUDIDO A UN MÉDICO O UNA MÉDICA DE ATENCIÓN ESPECIALIZADA DE LA SANIDAD PÚBLICA EN P.19a.

P.19b Y la última vez que su médico o médica de cabecera (de familia) le remitió al especialista, ¿cuánto tiempo pasó desde el día en que Ud. pidió cita al especialista hasta que éste/a le atendió?

- Días (134)(135) Meses (136)(137)
- No recuerda 98
 - N.C..... 99

P.19c En general, la atención que ha recibido en las consultas del o la especialista de la sanidad pública ha sido....

- Muy buena 1
- Buena 2
- Regular 3 (138)
- Mala 4
- Muy mala 5
- **(NO LEER)** Depende, en unas consultas mejor, en otras peor 6
- No recuerda 8
- N.C..... 9

P.19d Y respecto de lo que Ud. esperaba, esta atención ha sido....

- Mucho mejor 1
- Mejor 2
- Más o menos igual 3
- Peor 4 (139)
- Mucho peor 5
- **(NO LEER)** Depende, en unas consultas mejor, en otras peor 6
- No recuerda 8
- N.C..... 9

P.19e ¿Cuál era la especialidad del último médico o médica especialista que consultó? **(MOSTRAR TARJETA I).**

- (140)(141)
-
- Otras 97
 - No recuerda 98
 - N.C..... 99

P19 f

P.19f Cuando un problema de salud suyo ha requerido la visita al médico o a la médica de cabecera y una consulta al o la especialista, ¿cree que la coordinación entre ellos ha sido correcta?

- Si 1
- No 2 (142)
- N.S. 8
- N.C. 9

A TODAS LAS PERSONAS

P.20 A continuación, y con independencia de que Ud. utilice o no las consultas de especialistas de la sanidad pública, quisiera que valorase los siguientes aspectos referentes a la asistencia especializada. Utilice de nuevo una escala de 1 a 10, en la que el 1 significa que lo valora como "totalmente insatisfactorio" y el 10 que lo valora como "totalmente satisfactorio". **(MOSTRAR TARJETA F). (LEER UNA A UNA LAS ALTERNATIVAS ROTANDO EL ORDEN EN CADA ENTREVISTA).**

| | Escala | | |
|----------------------------------------------------------------------------------------------------------|---------|-------|------------|
| | 01 - 10 | NS NC | |
| 01 El tiempo dedicado por el médico o la médica a cada usuario o usuaria..... | ___ | 98 99 | (143)(144) |
| 02 El número de especialidades a las que se tiene acceso | ___ | 98 99 | (145)(146) |
| 03 El tiempo de espera hasta entrar en consulta | ___ | 98 99 | (147)(148) |
| 04 El conocimiento del historial y seguimiento de los problemas de salud de cada usuario o usuaria | ___ | 98 99 | (149)(150) |
| 05 La confianza y seguridad que transmite el médico o la médica | ___ | 98 99 | (151)(152) |
| 06 La facilidad para conseguir cita | ___ | 98 99 | (153)(154) |
| 07 El equipamiento y medios tecnológicos existentes en los centros | ___ | 98 99 | (155)(156) |
| 08 El trato recibido del personal sanitario | ___ | 98 99 | (157)(158) |
| 09 La información recibida sobre su problema de salud | ___ | 98 99 | (159)(160) |
| 10 Los consejos del médico o de la médica sobre alimentación, ejercicio, tabaco, alcohol, etc. | ___ | 98 99 | (161)(162) |
| 11 El tiempo que tarda el médico o la médica en verle desde que pide cita | ___ | 98 99 | (163)(164) |
| 12 El tiempo que se tarda con las pruebas diagnósticas | ___ | 98 99 | (165)(166) |
| Ítem por el que comienza | ___ | 98 99 | (167)(168) |

P.21 Durante los últimos doce meses, ¿ha estado Ud. ingresado en un hospital público o privado?

- Si 1
 - No 2
 - N.C. 9
- **Pasar a P.22** (169)

P.21a ¿Y puede recordar cuántas veces ha estado Ud. hospitalizado en un hospital público? Y, ¿cuántas veces en uno privado?

| | Público (170)(171) | Privado (172)(173) | |
|-------------------|-----------------------|-----------------------|-----------------------------------------------------------------|
| Nº de veces | ___ | ___ | Si ha estado exclusivamente en uno privado, pasar a P.22 |
| Ninguna | 97 | 97 | |
| No recuerda | 98 | 98 | |
| N.C. | 99 | 99 | |

ENTREVISTADOR/A: P.21b a 21f SÓLO A QUIENES HAN ESTADO INGRESADOS/AS EN UN HOSPITAL PÚBLICO EN P.21a.

P.21b El último ingreso en el hospital fue para....

- Una operación 1 → **Hacer P.21c a P.21f**
- Una prueba especial para saber lo que tenía 2
- Un tratamiento que sólo le podían hacer estando ingresado/a..... 3 → **Hacer P.21d a P.21f**
- Un parto/cesárea 4
- Otra razón, ¿cuál?
- 5
- N.C. 9 (174)

P.21c Cuando le informaron de que Ud. debía ser operado/a, ¿le dijeron cuánto tiempo, más o menos, tardarían en ingresarle/a?

- Si 1
- No 2 (175)
- N.S. 8
- N.C. 9

P.21d ¿Le asignaron durante su estancia en el hospital un médico o una médica responsable al que acudir para cualquier cosa relacionada con su problema de salud?

- Si 1
- No 2 (176)
- No recuerda . 8
- N.C. 9

P.21e En general, la atención que ha recibido en el hospital público ha sido....

- Muy buena 1
- Buena 2
- Regular 3 (177)
- Mala 4
- Muy mala 5
- N.C. 9

P.21f Y respecto de lo que Ud. esperaba, esta atención ha sido....

- Mucho mejor 1
- Mejor 2
- Más o menos igual 3 (178)
- Peor 4
- Mucho peor 5
- N.C. 9

A TODAS LAS PERSONAS

P.22 Por su experiencia personal o por la idea que Ud. tenga, quisiera que valorase los siguientes aspectos de la asistencia que se presta en los hospitales públicos, utilizando la misma escala de 1 a 10, en la que el 1 significa que lo valora "totalmente insatisfactorio" y el 10 que lo valora "totalmente satisfactorio". **(MOSTRAR TARJETA F). (LEER UNA A UNA LAS ALTERNATIVAS ROTANDO EL ORDEN EN CADA ENTREVISTA).**

| | Escala | | |
|-----------------------------------------------------------------------------------------------------------------|---------|------|------------|
| | 01 - 10 | NSNC | |
| 01 Aspectos de hostelería (comidas, aseos y comodidades generales de las habitaciones) | 98 | 99 | (179)(180) |
| 02 El papeleo para el ingreso | 98 | 99 | (181)(182) |
| 03 Tiempo que se tarda para un ingreso no urgente | 98 | 99 | (183)(184) |
| 04 Los cuidados y atención por parte del personal médico | 98 | 99 | (185)(186) |
| 05 Los cuidados y atención del personal de enfermería | 98 | 99 | (187)(188) |
| 06 El número de personas que comparten habitación | 98 | 99 | (189)(190) |
| 07 El trato recibido del personal no sanitario (administrativos y administrativas, celadores y celadoras) | 98 | 99 | (191)(192) |
| 08 El equipamiento y medios tecnológicos existentes en los hospitales | 98 | 99 | (193)(194) |
| 09 La información recibida sobre la evolución de su problema de salud | 98 | 99 | (195)(196) |
| 10 Los consejos del médico o de la médica sobre alimentación, ejercicio, tabaco, alcohol, etc. | 98 | 99 | (197)(198) |
| Ítem por el que se comienza | | | (199)(200) |

P.23 Le voy a leer algunos tipos de información que facilitan los servicios sanitarios públicos. ¿Podría valorar cada uno de los tipos de información utilizando una escala de 1 a 10, en la que 1 significa que "no facilita ninguna información" y el 10 que "facilita mucha información"? **(MOSTRAR TARJETA J).**

| | Escala | | |
|------------------------------------------------------------------------------------------------------------------------|---------|------|------------|
| | 01 - 10 | NSNC | |
| - La información que dan las administraciones sanitarias sobre los servicios que prestan | 98 | 99 | (201)(202) |
| - La información acerca de los derechos y vías de reclamación de que disponen los usuarios o las usuarias | 98 | 99 | (203)(204) |
| - La información sobre medidas y leyes adoptadas por las autoridades sanitarias | 98 | 99 | (205)(206) |
| - La información emitida a través de las campañas dirigidas a la población sobre los principales problemas de salud .. | 98 | 99 | (207)(208) |
| - La información disponible sobre qué trámites realizar para acceder al especialista o ingresar en un hospital | 98 | 99 | (209)(210) |

P.24 ¿Cree Ud. que esta Comunidad Autónoma está llevando a cabo acciones destinadas a mejorar las listas de espera?

- Sí 1
- No 2 (211)
- N.S. 8
- N.C. 9

P.25 En general, ¿cree Ud. que, durante los últimos doce meses, el problema de las listas de espera....?

- Ha mejorado 1
- Ha empeorado 2
- Sigue igual 3 (212)
- N.S. 8
- N.C. 9

P.26 Cambiando de tema, en su opinión, ¿la sanidad pública presta los mismos servicios a todas las personas con independencia de que....?

| | SI | No | NS | NC | |
|----------------------------------------------------------|----|----|----|----|-------|
| - Se resida en una Comunidad Autónoma u otra | 1 | 2 | 8 | 9 | (213) |
| - Se resida en una zona rural o en una ciudad | 1 | 2 | 8 | 9 | (214) |
| - Se sea joven o anciano/anciana | 1 | 2 | 8 | 9 | (215) |
| - Se tenga un nivel social o económico alto o bajo | 1 | 2 | 8 | 9 | (216) |
| - Se sea hombre o mujer | 1 | 2 | 8 | 9 | (217) |
| - Se sea español/española o extranjero/ extranjera | 1 | 2 | 8 | 9 | (218) |
| - Se resida legalmente o no | 1 | 2 | 8 | 9 | (219) |

P.27 En su opinión, ¿cada uno de los siguientes servicios asistenciales de la sanidad ha mejorado, ha empeorado o sigue igual respecto a los últimos cinco años?

| | Ha mejorado | Ha empeorado | Sigue igual | NSNC | |
|-------------------------------------------------|-------------|--------------|-------------|------|---------|
| - Atención primaria | 1 | 2 | 3 | 8 | 9 (220) |
| - Las consultas de atención especializada | 1 | 2 | 3 | 8 | 9 (221) |
| - Atención hospitalaria | 1 | 2 | 3 | 8 | 9 (222) |

P.28 Comparando con los servicios sanitarios públicos de otras Comunidades, considera que los que recibe en esta Comunidad Autónoma son.....

- Mejores 1
- Iguales 2
- Peores 3 (223)
- N.S. 8
- N.C. 9

P.29 ¿Cree Ud. que gestionando la asistencia sanitaria las Comunidades Autónomas en lugar del Estado, el ciudadano o la ciudadana recibe un servicio....?

- Mejor 1
- Igual 2
- Peor 3 (224)
- N.S. 8
- N.C. 9

P.30 Ahora que todas las Comunidades Autónomas son responsables de sus propios servicios sanitarios, ¿piensa Ud. que deberían ponerse de acuerdo entre ellas a la hora de ofrecer nuevos servicios a los ciudadanos y a las ciudadanas?

- Sí 1
- No 2 (225)
- N.S. 8
- N.C. 9

P.31 Cambiando de tema, en general, ¿con qué frecuencia lee o escucha algunas noticias sobre equivocaciones o errores en la asistencia sanitaria?

- Muchas veces 1
- Bastantes veces 2
- Pocas veces 3 (226)
- Nunca 4
- N.C. 9

P.32 Y, en España, ¿diría Ud. que se producen en la asistencia sanitaria.....

- Muchos errores 1
- Bastantes errores 2
- Pocos errores 3 (227)
- Muy pocos, casi ninguno ... 4
- N.S. 8
- N.C. 9

P.33 Y, ¿cree Ud. que el número (cantidad) de equivocaciones y errores representan en la asistencia sanitaria española, un problema....

- Muy importante 1
- Bastante importante 2
- Poco importante 3 (228)
- Nada importante 4
- N.S. 8
- N.C. 9

P.34 Y hablando ahora de diferentes profesionales que prestan servicios en nuestro sistema sanitario, ¿me podría decir, por favor, en qué grado: mucho, bastante, poco o nada, confía Ud. en que realizan adecuadamente su labor...?

| | Bas- | | | | |
|---------------------------------|-------|-------|------|------|-----------|
| | Mucho | tante | Poco | Nada | NSNC |
| - Médicos y médicas..... | 1 | 2 | 3 | 4 | 8 9 (229) |
| - Enfermeras y enfermeros | 1 | 2 | 3 | 4 | 8 9 (230) |
| - Otro personal sanitario | 1 | 2 | 3 | 4 | 8 9 (231) |

P.35 ¿Ud. o alguien de su familia ha sufrido algún tipo de error en la asistencia sanitaria recibida en....?

P.35a (Sólo a quienes contestan "Si" en alguna de las categorías de P.35). ¿Y este error afectó de una manera muy grave, bastante grave, poco o nada grave, a su salud o a la salud de su familia?

1. Muy grave
2. Bastante grave
3. Poco grave
4. Nada grave

| | P.35 | | | P.35a | | | | |
|---------------------------------|------|----|---------|-------|---|---|---|---------|
| | Si | No | NC | 1 | 2 | 3 | 4 | NC |
| - Atención primaria | 1 | 2 | 9 (232) | 1 | 2 | 3 | 4 | 9 (236) |
| - Consulta de especialista ... | 1 | 2 | 9 (233) | 1 | 2 | 3 | 4 | 9 (237) |
| - Un ingreso hospitalario | 1 | 2 | 9 (234) | 1 | 2 | 3 | 4 | 9 (238) |
| - Un servicio de urgencias ... | 1 | 2 | 9 (235) | 1 | 2 | 3 | 4 | 9 (239) |

P.36 Cuando se habla de política se utilizan normalmente las expresiones izquierda y derecha. En esta tarjeta hay una serie de casillas que van de izquierda a derecha. ¿En qué casilla se colocaría Ud.? (MOSTRAR TARJETA ESCALA). (PEDIR A LA PERSONA ENTREVISTADA QUE INDIQUE LA CASILLA EN LA QUE SE COLOCARÍA Y REDONDEAR EL NÚMERO CORRESPONDIENTE).

(240)(241)

lzda. Dcha. NS NC

| | | | | | | | | | | | |
|----|----|----|----|----|----|----|----|----|----|----|----|
| 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10 | 98 | 99 |
|----|----|----|----|----|----|----|----|----|----|----|----|

P.37 Y ¿cómo se definiría Ud. en política según la siguiente clasificación? (MOSTRAR TARJETA K).

P.37a ¿Y con alguna más? (MOSTRAR TARJETA K).

| | P.37 | P.37a |
|-------------------------------|----------|----------|
| - Conservador/a | 01 | 01 |
| - Demócrata cristiano/a | 02 | 02 |
| - Liberal | 03 | 03 |
| - Socialdemócrata | 04 (242) | 04 (244) |
| - Socialista | 05 | 05 |
| - Comunista | 06 | 06 |
| - Nacionalista | 07 (243) | 07 (245) |
| - Feminista | 08 | 08 |
| - Ecologista | 09 | 09 |
| - Otra respuesta, ¿cuál? | 10 | 10 |
| - N.S. | 98 | 98 |
| - N.C. | 99 | 99 |

P.38 ¿Me podría decir si en las elecciones generales del 9 de marzo de 2008...? (MOSTRAR TARJETA RECUERDO DE VOTO).

- Fue a votar y votó 1
- No tenía edad para votar 2
- Fue a votar pero no pudo hacerlo .. 3
- No fue a votar porque no pudo 4 (246)
- Prefirió no votar 5
- No recuerda 8
- N.C. 9

P.38a ¿Y podría decirme a qué partido o coalición votó? Si lo prefiere, puede decirme el número que aparece en esta tarjeta al lado del partido al que votó. (MOSTRAR TARJETA LISTADO PARTIDOS).

| | | | |
|----------------------------|----------------|-----------------------|------------|
| - PSOE | 01 | - BNG | 08 |
| - PP | 02 | - CC | 09 |
| - IU (ICV en Cataluña). 03 | - Na-Bai | 10 | |
| - CIU | 04 | - Otro partido ¿cuál? | (247)(248) |
| - PNV | 05 | | 11 |
| - UPyD | 06 | - En blanco | 12 |
| - ERC | 07 | - No recuerda | 98 |
| | | - N.C. | 99 |

P.39 Sexo:

- Hombre 1
- Mujer 2 (249)

P.40 ¿Cuántos años cumplió Ud. en su último cumpleaños?

_____ (250)(251)

N.C. 99

P.41 Actualmente, entre todos los miembros del hogar (incluido Ud.) y por todos los conceptos, ¿de cuántos ingresos netos disponen por término medio en su hogar al mes? No le pido que me indique la cantidad exacta, sino que me señale en esta tarjeta en qué tramo de la escala están comprendidos los ingresos de su hogar. Si lo prefiere, puede decirme el número que aparece al lado de la cantidad correspondiente. (MOSTRAR TARJETA INGRESOS. Si el/la entrevistado/a contesta en pesetas, pasar la cantidad a euros).

- Menos o igual a 300 € 01
- De 301 a 600 € 02
- De 601 a 900 € 03
- De 901 a 1.200 € 04
- De 1.201 a 1.800 € 05 (252)(253)
- De 1.801 a 2.400 € 06
- De 2.401 a 3.000 € 07
- De 3.001 a 4.500 € 08
- De 4.501 a 6.000 € 09
- Más de 6.000 € 10
- N.C. 99

P.42 ¿Ha ido Ud. a la escuela o cursado algún tipo de estudios? (ENTREVISTADOR/A: en caso negativo, preguntar si sabe leer y escribir).

- No, es analfabeto 1
- No, pero sabe leer y escribir ... 2 (254)
- Si, ha ido a la escuela 3
- N.C. 9

→ PASAR A P.43

→ PASAR A P.43

P.42a ¿Cuáles son los estudios de más alto nivel oficial que Ud. ha cursado (con independencia de que los haya terminado o no)? Por favor, especifique lo más posible, diciéndome el curso en que estaba cuando los terminó (o los interrumpió), y también el nombre que tenían entonces esos estudios: (ej: 3 años de Estudios Primarios, Primaria, 5º de Bachillerato, Maestría Industrial, Preuniversitario, 4º de EGB, Licenciatura, Doctorado, FP1, etc.).

(ENTREVISTADOR/A: Si aún está estudiando, anotar el último curso que haya completado. Si no ha completado la Primaria, anotar nº de años que asistió a la escuela).

CURSO _____

NOMBRE (de los estudios) _____

NIVEL (Codificar según T. ESTUDIOS) _____ (255)(256)

P.43 ¿Cómo describiría Ud. su estado de salud en general: muy bueno, bueno, regular, malo o muy malo?

- Muy bueno 1
- Bueno 2
- Regular 3
- Malo 4 (257)
- Muy malo 5
- N.S. 8
- N.C. 9

P.44 ¿Tiene hijos o hijas o nietos o nietas menores de 18 años?

- Sí 1
- No 2 (258)
- N.C. 9

P.44a ¿Algunos de ellos o ellas tienen entre 11 y 18 años?

- Sí 1
- No 2 (259)
- No recuerda 8
- N.C. 9

P.45 ¿Quién es la persona que aporta más ingresos al hogar?

- La persona entrevistada 1
- Otra persona 2
- (NO LEER) La persona entrevistada y otra casi a partes iguales 3 (260)
- N.C. 9

P.46 ¿En cuál de las siguientes situaciones se encuentra Ud. actualmente? (MOSTRAR TARJETA SITUACIÓN LABORAL).

- Trabaja 1
- Jubilado/a o pensionista (anteriormente ha trabajado) 2
- Pensionista (anteriormente no ha trabajado) 3
- Parado/a y ha trabajado antes 4 (261)
- Parado/a y busca su primer empleo 5
- Estudiante 6
- Trabajo doméstico no remunerado 7
- Otra situación, ¿cuál? _____
- 8
- N.C. 9

P.47 En su lugar de trabajo, ¿se fomenta el hábito de la alimentación saludable?

- Sí 1
- No 2 (262)
- (NO LEER) No sabe a qué se refiere 3
- N.S. 8
- N.C. 9

P.47a ¿Cuáles de las siguientes actividades se realizan para fomentar la alimentación saludable? (RESPUESTA MÚLTIPLE. ANOTAR TODAS LAS QUE DIGA LA PERSONA ENTREVISTADA).

- Máquinas expendedoras con contenido de alimentos saludables 1 (263)
- Recomendaciones sobre aperitivos /o comidas saludables 1 (264)
- Charlas o materiales informativos (presenciales, página web, folletos, etc.) 1 (265)
- Otras 1 (266)
- N.C. 1 (267)

P.48 En su lugar de trabajo, ¿se realiza algún tipo de actividades de promoción de la actividad física?

- Sí 1
- No 2 (262)
- (NO LEER) No sabe a qué se refiere 3
- N.S. 8
- N.C. 9

P.48a

P.48a ¿Cuáles de las siguientes actividades se realizan para promocionar la actividad física? (RESPUESTA MÚLTIPLE. ANOTAR TODAS LAS QUE DIGA LA PERSONA ENTREVISTADA).

- Hay instalaciones para realizar estas actividades en el propio lugar de trabajo 1 (269)
- Tiempo para realizar actividad física durante el horario laboral 1 (270)
- Pago de la totalidad o parte del uso de instalaciones, o descuentos en las mismas 1 (271)
- Organización de eventos o competiciones deportivas 1 (272)
- Otras 1 (273)
- N.C. 1 (274)

ENTREVISTADOR/A: Las preguntas 49, 50, 50a y 51 referirlas:

- al trabajo actual (sí 1 en P.48)
- al último trabajo (sí 2 ó 4 en P.48)
- al trabajo de la persona que aporta más ingresos al hogar (sí 3,5,6,7 u 8 en P.48)

P.49 ¿Y cuál es/era su actual/última ocupación u oficio? Es decir, ¿en qué consiste/tia específicamente su trabajo? (Precisar lo más posible las actividades realizadas. EJEMPLO: auxiliar de clínica, agente de seguridad, esteticista, guarda forestal, terapeuta ocupacional, patronista de ropa, etc.). Nos referimos a su ocupación principal: aquella por la que Ud. (o la persona que aporta más ingresos al hogar) obtiene/nia mayores ingresos.

..... (275)(276)(277)

N.C. 999

P.50 ¿Ud. (o la persona que aporta más ingresos al hogar) trabaja (o trabajaba) como... (MOSTRAR TARJETA RELACIÓN LABORAL).

- Asalariado/a fijo/a (a sueldo, comisión, jornal, etc., con carácter fijo) 1
- Asalariado/a eventual o interino/a (a sueldo, comisión, jornal, etc., con carácter temporal o interino) 2
- Empresario/a o profesional con asalariados/as 3
- Profesional o trabajador/a autónomo/a (sin asalariados/as) 4 (278)
- Ayuda familiar (sin remuneración reglamentada en la empresa o negocio de un familiar) 5
- Miembro de una cooperativa 6
- Otra situación, ¿cuál? _____
- 7
- N.C. 9

P.50a ¿Trabaja/ba Ud. (o la persona que aporta más ingresos al hogar) en la Administración Pública, en una empresa pública, en una empresa privada, en una organización privada sin fines de lucro o en el servicio doméstico?

- Administración Pública 1
- Empresa pública 2
- Empresa privada 3
- Organización sin fines de lucro 4 (279)
- Servicio doméstico 5
- Otros (especificar) _____
- 6
- N.C. 9

ENTREVISTADOR/A: Si se trata de un/a funcionario/a, anote también Grupo (A,B,C,D,E) y Nivel del puesto de trabajo (1-30).

Grupo _____ Nivel _____

A TODAS LAS PERSONAS

P.51 ¿A qué actividad se dedica principalmente la empresa u organización donde Ud. (o la persona que aporta más ingresos al hogar) trabaja/ba? (EJEMPLOS: fábrica de artículos de deporte, correos, alquiler de coches, electricidad, reparaciones, industria del cuero, etc.).

(Anotar) _____ (280)(281)

N.C. 99

P.52 Con respecto a la nacionalidad, ¿tiene Ud.

- La nacionalidad española 1 → **Hacer P.52a** (282)
- La nacionalidad española y otra ... 2 → **Hacer P.52a y P.52b**
- Sólo otra nacionalidad 3 → **Hacer P.52b, 52c y 52d**
- N.C. 9

SÓLO A QUIENES CONTESTAN 1 ó 2 en P.52

P.52a ¿Y tiene Ud. la nacionalidad española desde que nació o la ha adquirido con posterioridad? (283)

- Desde que nació 1 → **Pasar a P.53**
- La ha adquirido con posterioridad ... 2 → **Hacer P.52c y P.52d**
- N.C. 9

SÓLO A QUIENES CONTESTAN 2 ó 3 en P.52

P.52b ¿Qué nacionalidad?

_____ (284)(285)(286)

N.C. 999

A QUIENES TIENEN SÓLO OTRA NACIONALIDAD (3 en P.52) O HAN ADQUIRIDO LA NACIONALIDAD ESPAÑOLA CON POSTERIORIDAD (2 en P.52a)

P.52c ¿Cómo definiría Ud. su manejo del castellano?

P.52d (A RELLENAR POR EL/LA ENTREVISTADOR/A)
Independientemente de lo que haya contestado esta persona ¿cómo definiría su manejo del castellano?

| | P.52c Entrevistado/a (287) | P.52d Entrevistador/a (288) |
|------------------------------------|-----------------------------------------|------------------------------------------|
| - No lo habla en absoluto | 1 | 1 |
| - Lo habla un poco | 2 | 2 |
| - Lo habla más o menos bien ... | 3 | 3 |
| - Lo habla con fluidez | 4 | 4 |
| - Lo habla como si fuera nativo .. | 5 | 5 |
| - Es su idioma materno | 6 | 6 |
| - N.S. | 8 | 8 |
| - N.C. | 9 | 9 |

A TODAS LAS PERSONAS

P.53 ¿En qué país ha nacido Ud?

- En España 1
- En otro país 2 (289)
- N.C. 9

↓

P.53a ¿En qué Comunidad Autónoma? (**MOSTRAR TARJETA COMUNIDADES AUTÓNOMAS**).

_____ (290)(291)

N.C. 99

↓

P.53b ¿Cuál?

_____ (292)(293)(294)

N.C. 999

P.54 En los últimos doce meses, ¿ha salido Ud. en algún momento de su Comunidad Autónoma?

- Sí 1
- No 2 (295)
- No recuerda ... 8
- N.C. 9

P.55 ¿Le importaría darme su nº de teléfono?

(ENTREVISTADOR/A: EXPLICAR QUE ES PARA QUE EL CIS PUEDA HACER UNA POSIBLE COMPROBACIÓN TELEFÓNICA DE QUE LA ENTREVISTA HA SIDO REALIZADA).

- Tiene teléfono y da número 1 teléfono _____
- No tiene teléfono 2
- Tiene teléfono y no da número ... 3 (296)
- N.C. 9

A RELLENAR POR EL/LA ENTREVISTADOR/A

P.56 VALORACIÓN DE LA ENTREVISTA:

- Se ha realizado la entrevista en presencia de terceras personas 1 (297)
- Ha expresado la persona entrevistada deseo de abandonar la entrevista antes de finalizarla 1 (298)
- Se ha sentido la persona entrevistada incómoda o molesta por el tema de la encuesta 1 (299)
- Ha tenido prisa la persona entrevistada por acabar la entrevista..... 1 (300)

P.57 ¿Ha habido alguna pregunta concreta que provocara incomodidad? (**ANOTAR Nº DE PREGUNTA. MÁXIMO 5**).

(301)(302)(303) (304)(305)(306) (307)(308)(309)
(310)(311)(312) (313)(314)(315)

P.58 ¿Ha habido alguna pregunta concreta que la persona entrevistada tuviera dificultades en comprender o tuviera que ser explicada? (**ANOTAR Nº DE PREGUNTA. MÁXIMO 5**).

(316)(317)(318) (319)(320)(321) (322)(323)(324)
(325)(326)(327) (328)(329)(330)

P.59 ¿Han intervenido activamente terceras personas en el desarrollo de la entrevista?

- Sí 1 (331)
- No 2

P.60 Respecto a las tarjetas.....

- La persona entrevistada las ha usado todas 1
- Sólo ha usado algunas 2 (332)
- Las he leído yo..... 3

P.61 Desarrollo de la entrevista:

- Muy buena 1
- Buena 2
- Regular 3 (333)
- Mala 4
- Muy mala 5

P.62 Sinceridad de la persona entrevistada:

- Mucha 1
- Bastante 2 (334)
- Poca 3
- Ninguna 4

The Health Barometer is an opinion study which, since 1995, is conducted by the Ministry of Health, Social Policy and Equality by means of a cooperation agreement with the Sociological Research Centre [CIS].

Its target is obtaining information on the perception of the citizens about the health system performance, the impact of the measures related to health policies, the knowledge and/or attitudes of the citizens to health problems of relevant interest, the degree of penetration of information campaigns and the reassessment in previous periods.

The interviewees are citizens of both genders aged 18 and above, residing in all of the autonomous regions. Surveys are taken at the household of the interviewees, and this way, the slant due to celebrate them in health centres is minimized or eliminated, furthermore, as this study is aimed to the population in general, allows to know the opinion of the citizens on public health services, regardless of the matter they have used them or not.

In each annual edition 3 sub-samples are made being nationally representative, their results reflect the situation of the country in the period when interviews are held. With the aggregation of the sub-samples, each year the Health Barometer as a whole shows the average state of matters in Spain.

The Health Barometer is included in the National Statistical Plan, main instrument of the statistical activity with state-related purposes, by means of which is guaranteed that the State, the European Union, the Institutions and the users may have the necessary statistical information for the monitoring and evaluation of the applied policies.

