
Inventory of National Rural Health Research Related Databases

Database name:	Canada's Alcohol and Other Drugs Survey
Thematic Coverage:	This survey collected information on the lifestyle and health of Canadians, complementing existing administrative databases. Information will be used to update and expand data related to the alcohol and other drug experiences of Canadians with regard to use patterns, perception, risk related behaviours, problems and consequences, treatment, policies and programs.
Maintained by:	Special Surveys Division, Statistics Canada
Availability:	A public release version of the data files is available through the Data Liberation Initiative (DLI). Some variables are suppressed and other are aggregated to protect the anonymity of individual survey respondents. Custom tabulations are also available on a cost recovery basis.

Start Date:	1994
Release Date:	N/A – Discontinued
Frequency of collection:	One time

Data Collection:	Sample survey of all persons 15 years of age or older living in Canada excluding residents of the Territories and full-time residents of institutions. Data was obtained from 100% telephone interview.
Sample size:	16,082 households. Because the main purpose of this survey is to produce reliable estimates in all 10 provinces, an equal number of respondents in each province was targeted.

Geographic coverage:	All provinces, excluding all territories, full-time residents of institutions.
Lowest geographic level collected:	Postal Code
Lowest geographic level of release:	Province
Existing rural variable:	Census Metropolitan Area (CMA) / Census Agglomeration (CA) and Non-CMA/CA are coded. Prince Edward Island has no CMA and the CMAs of Montreal and Toronto were each separate strata.

Census Metropolitan Area (CMA) / Census Agglomeration (CA) and Non-CMA/CA can be used as an urban / rural variable. CMA/CA and Non-CMA/CA can be used to construct a 5-level rural/urban variable. Urban core, urban fringe and rural fringe distinguish between central and peripheral urban and rural areas within a census metropolitan area (CMA) or census agglomeration (CA). **Urban core** is a large urban area around which a CMA or a CA is delineated. The urban core must have a population (based on the previous census) of at least 100,000 persons in the case of a CMA, or between 10,000 and 99,999 persons in the case of a CA. The urban core of a CA that has been merged with an adjacent CMA or larger CA is called the **secondary urban core**. **Urban fringe** is the urban area within a CMA or CA that is not contiguous to the urban core. It has a minimum population of 1,000 and a population density of at least 400 per square kilometre, based on the previous census counts. **Rural fringe** is all territory within a CMA or CA not classified as an urban core or an urban fringe. The other levels of

geography in this classification are **urban area (small towns) that lie outside of CMA** and **rural area lying outside of CMA**.

Rural definitions that can be constructed from this database include (building block)[†]:

- ✓ Rural and Small Town definition (Census Subdivision)
- ✓ Metropolitan area and census agglomeration Influenced Zones (Census Subdivision)
- ✓ OECD “rural communities” definition (Census Consolidated Subdivision)
- ✓ OECD “predominantly rural regions” definition (Census Division)
- ✓ Ehrensaft’s “Beale codes” (Census Division)

[†] Results for these areas of geography could conceivably be derived from postal codes if respondent confidentiality is ensured.

Data Elements:

- Demography, Employment activities
- Policy with respect to how respondents felt about laws concerning alcohol and other drugs
- General Health, Stress and ability to handle personal problems
- Respondents’ and other persons’ drinking behaviour and its consequences
- Tobacco Consumption
- Use of Medicines and other drugs (including Marijuana or hashish, Cocaine or crack, LSD, Speed (amphetamines), Heroin, Glue, other solvents, Steroids)

Notes:

This survey is similar to the National Alcohol and Drug Survey (NADS), but incorporated an emphasis on “at risk” populations, as defined by Canada’s Drug Strategy, Phase II. It attempted to fill gaps identified in the NADS questionnaire.

For more information, contact the Special Surveys Division, ssd@statcan.ca