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Special Surveys Program

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Overview of Special Surveys 1991

Conducted by the Household Surveys Division of Statistics Canada

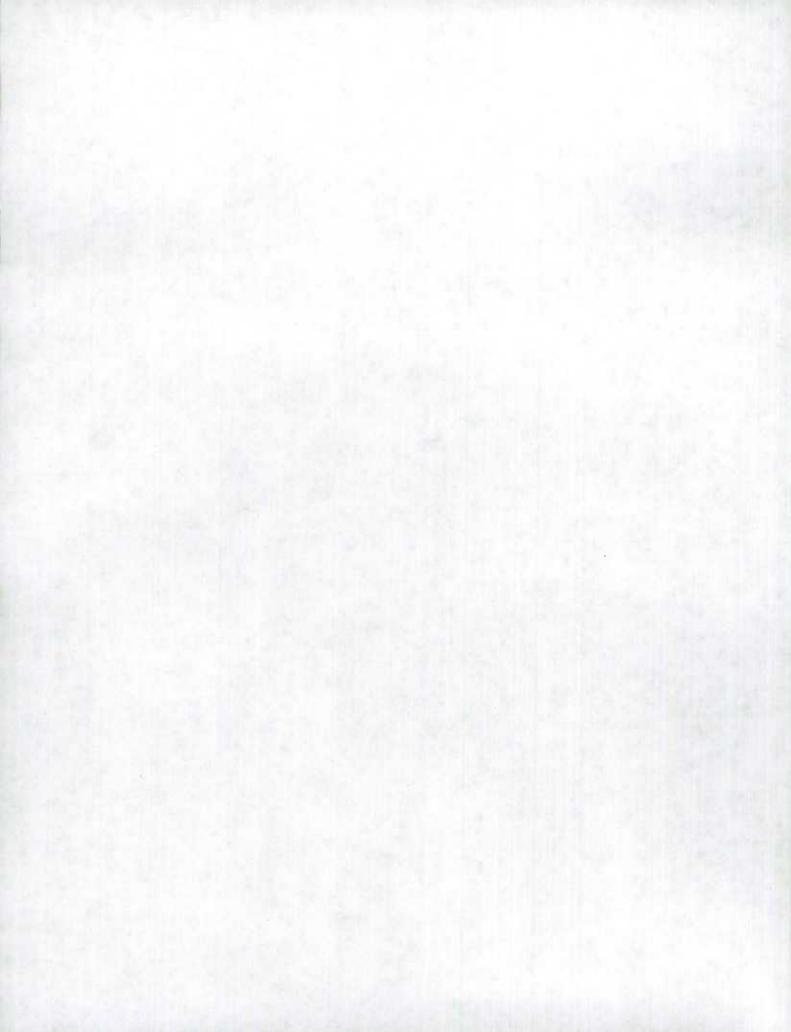
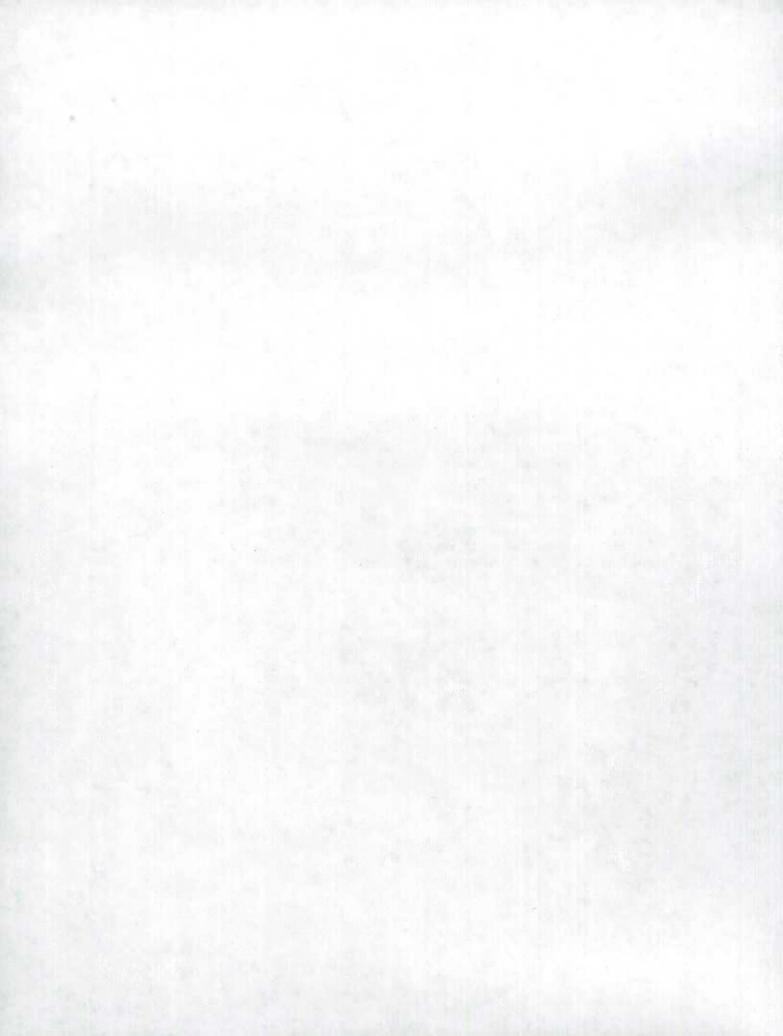


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INTRODUCTION

This report provides an overview of the Special Surveys Program managed by the Special Surveys Group within the Household Surveys Division of Statistics Canada.

Further information on the survey activities of the Special Surveys Group may be obtained by contacting:

Mr. T. Scott Murray Special Surveys Group Household Surveys Division Statistics Canada Jean Talon Building, 5-D5 Tunney's Pasture Ottawa, Ontario K1A 0T6

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(613) 951-9476

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(613) 951-0562 MURSCOTT@NRCVM01

INTERNET: WCSSTCAN@CCS.CARLETON.CA

THE SPECIAL SURVEYS PROGRAM

The Special Surveys Program was established in 1973 to provide a focus for the design and implementation of surveys not provided for in Statistics Canada's regular program of surveys. Thus, the term "Special" refers to the fact that the program provides special interest data not available elsewhere. The program is managed by the Special Surveys Group, which is part of the Household Surveys Division in the Social, Institutions and Labour Statistics Field. The Group offers a broad range of survey design and implementation services on a cost-recovery basis to federal and provincial government departments, institutions and private agencies. The Group specializes in the design and conduct of household surveys and has successfully used a variety of data collection methodologies including personal, telephone and mail. Related services are provided through Statistics Canada's national network of regional offices, which employ approximately 1,000 experienced interviewers and maintain sophisticated data capture facilities. The Group also has access to several cost effective and statistically reliable sampling methodologies, including the ability to conduct surveys as supplements to the 72,300 dwellings in the monthly Labour Force Survey. Statistical and methodological advice is provided by statisticians from the Bureau's Social Survey Methods Division.

DATA HOLDINGS OF THE SPECIAL SURVEYS GROUP

Since it's inception, the Special Surveys Program has amassed a wealth of data relating to a wide variety of research topics, all of it in machine-readable format. For many subjects these files represent the only source of national and provincial estimates. Included as Appendix A is a list of surveys conducted by the Special Surveys Group dating back to 1976. Data for most surveys is available in the form of public use microdata files relating to individual survey respondents, or in the form of user specified tabulations. In both cases users are required to pay a small amount to offset the marginal cost of producing the output. Information on exactly what is available may be obtained by contacting:

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Dissemination and User Support
Special Surveys Group
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Jean Talon Building, 5-D8
Tunney's Pasture
Ottawa, Ontario
K1A 0T6

Telephone: (613) 951-4598 FAX: (613) 951-0562

BITNET: MURSCOTT@NRCVM01

INTERNET: WCSSTCAN@CCS.CARLETON.CA

THE SPECIAL SURVEYS PROGRAM IN 1991

A number of interesting and innovative surveys were fielded in 1991. The following section provides readers with the name of a contact for each study, a brief outline of the survey methodology, and copies of any questionnaires used. Since a number of the surveys included in the report were conducted as supplements to the monthly Labour Force Survey, copies of the LFS questionnaires and code sheets have been appended as Appendix B. Readers requiring additional information about any of the surveys contained in this report are encouraged to write or call the Dissemination and User Support Unit or the Project Manager listed with each survey. Interested users may also obtain copies of similar "Overviews" for the years 1966-1990.

Labour Market Activity Survey (1990)



Survey Month: January to February 1991

Labour Market Activity Survey (1990) Title:

Employment and Immigration Canada Sponsor:

Survey Method: Personal/Telephone Interview

Sample Size: 62,000 persons

Objectives: Information obtained from the Labour Market Activity Survey:

- measures the frequency and number of job changes occurring in the

Canadian labour market over one- and two-year periods,

- provides information on the characteristics (wage rates, usual work

schedules, etc.) of jobs held,

- identifies groups of people who would benefit from EIC programs,

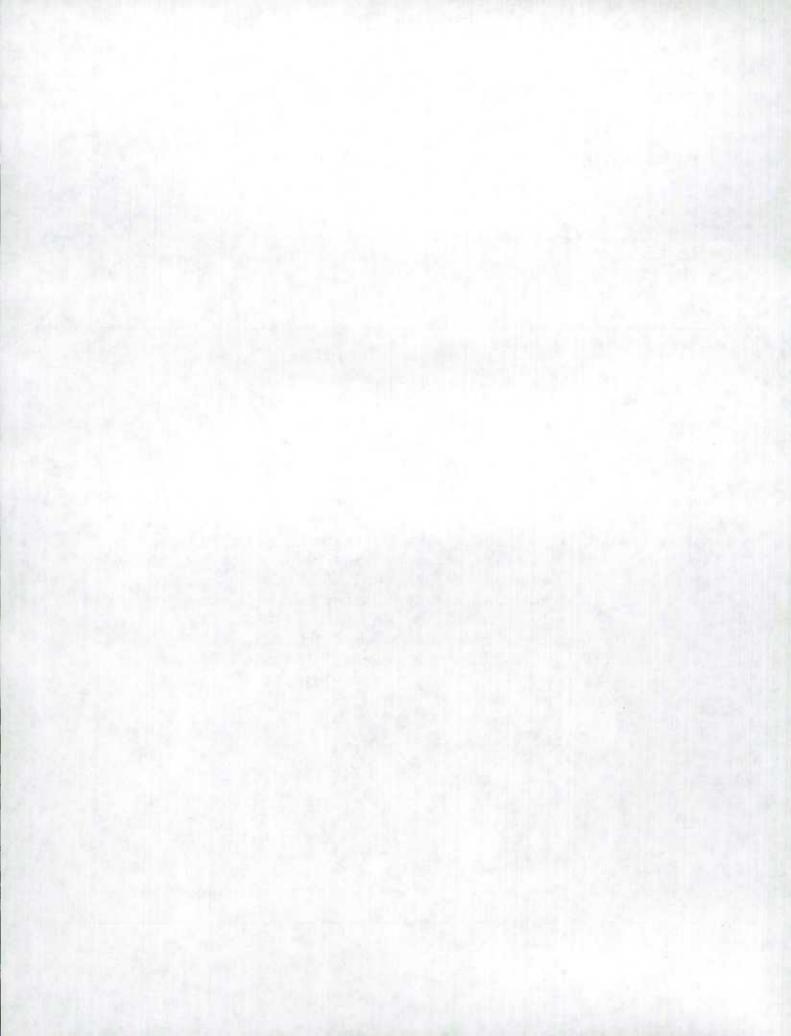
- identifies participants of specific EIC programs.

Project Manager: Richard Veevers (951-4617)

Microdata: Yes Price No

> X \$1,000.00*

^{*} A 1990 cross-sectional file costs \$1,000.00 and a three year longitudinal file (1988 to 1990) costs \$1,000.00 as well.



Labour Market Activity Survey (1990)

Confidential (when completed)

Authority — Statistics Act. Revised Statutes of Canada, 1985, Chapter S19.

	LABEL GOES HERE	COMPLETE FOR NEW HOUSEHOLD MEMBERS ON F03A OR F03C AND NEW ELIGIBLE HOUSEHOLD MEMBERS ON F03B FORM No. Docket No. Assignment No. F03A or F03C OR 3 4 9 5 Lang. Given Name Given Name 8 Telephone No. Split LD. HRD page-line No. Lang.
		CALLS AND APPOINTMENTS
# Dat	e	Notes
2		
3		
4		LUNE BERTHAMPTON PLANT SALES
		DETING THE FOR
Canada.	the survey by saying: "Statistics Canada is ey at the request of Employment and Immig The purpose is to collect information abo of work and the types of jobs held during 199 on will be kept strictly confidential as required Act."	gration when the person responding for other household members but the is unsure of the answers to the questions, arrangements 90. All should be made to telephone at a convenient time when the
	9. START TIM	E : [-

10. IN 1990, HOW MANY EMPLOYERS DID ... WORK FOR, INCLUDING SELF-EMPLOYMENT?

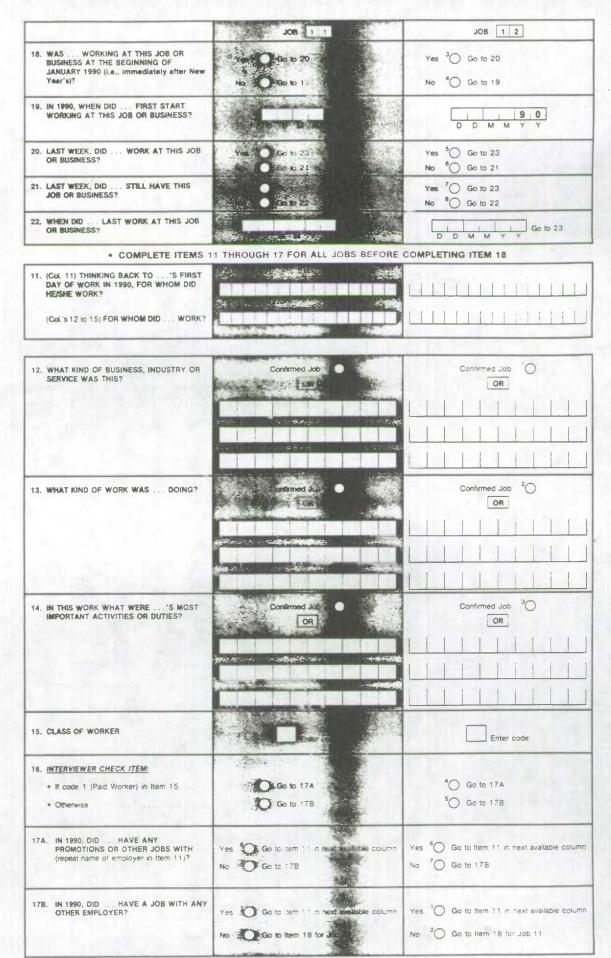
DATE

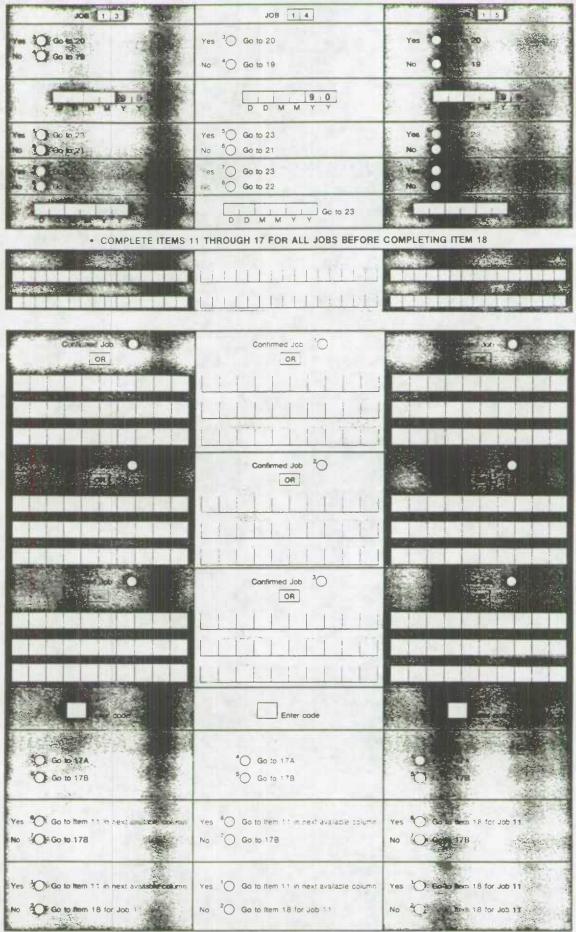
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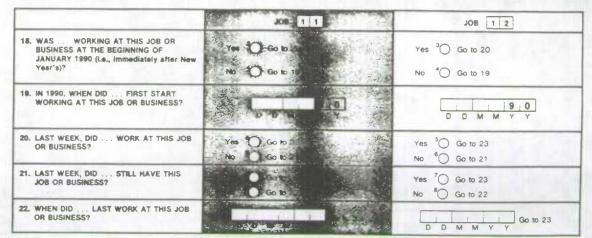
I AM GOING TO ASK YOU ABOUT THE JOBS ... HELD IN 1990. IN THIS SURVEY, A JOB CHANGE IS A CHANGE IN BOTH <u>USUAL</u> DUTIES AND <u>USUAL</u> WAGE OR SALARY.

8-5103-216 1 1990-10-26 STC/HLD-040-03366

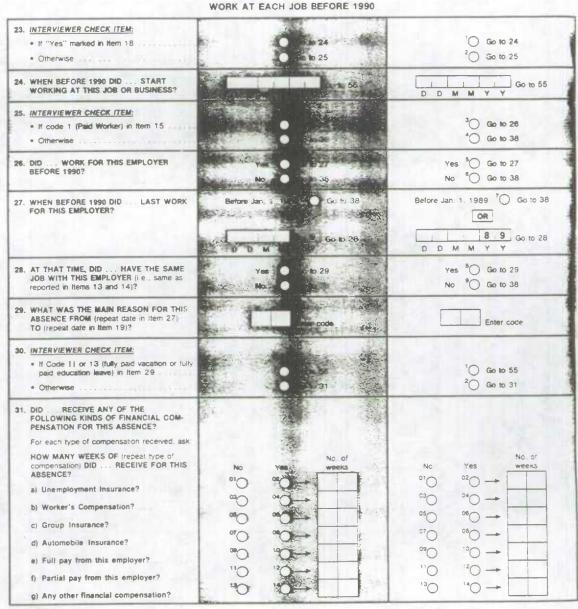
Canad'ä

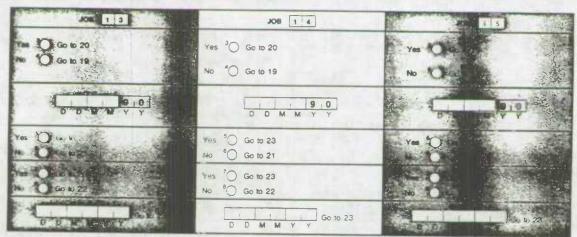








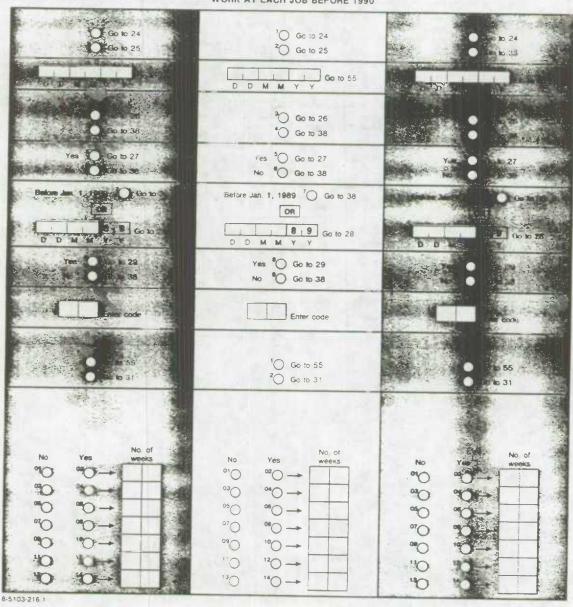




. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



WORK AT EACH JOB BEFORE 1990

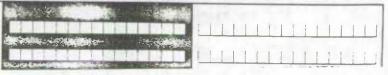


13

	JOB (4)	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes O Go to 20 = 1	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?		D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes O Go to 23	Yes ⁵ () Go to 23 No ⁶ () Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?		Yes ⁷ Go to 23 No ⁶ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y

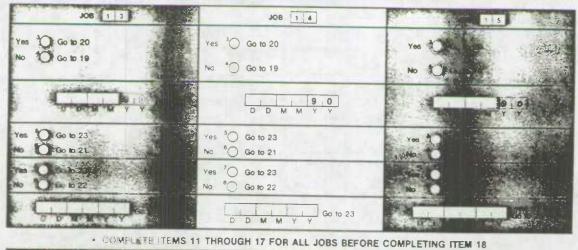
11. (Col. 11) THINKING BACK TO ...'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?

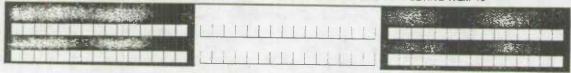
(Col.'s 12 to 15) FOR WHOM DID WORK?



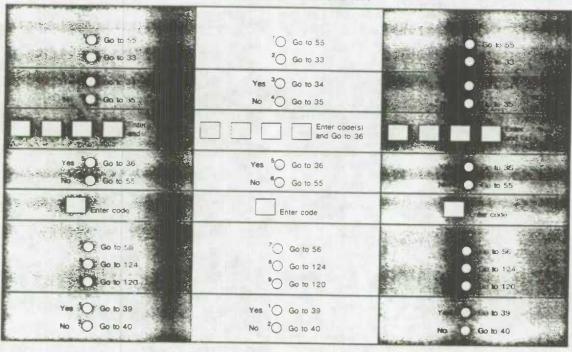
WORK AT EACH JOB BEFORE 1990

32. INTERVIEWER CHECK ITEM: • If code 01: 09 or 10 (own illness, accident or pregnancy) in Item 29 • Otherwise	55	¹
33. DID LOOK FOR WORK AT ANY TIME DURING THIS ABSENCE?		Yes ³ Go to 34 No ⁴ Go to 35
34. WHAT DID DO TO FIND WORK DURING THIS ABSENCE? (Mark all methods reported)		Enter code(s) and Go to 36
35. DID WANT A JOB AT ANY TIME DURING THIS ABSENCE?	Yes	Yes ⁵ () Go to 36 No ⁶ () Go to 55
36. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS ABSENCE?		Enter code
37. INTERVIEWER CHECK ITEM: If code 1 (Paid Worker) in Item 15 If code 2 or code 6 in Item 15 Otherwise	•	Go to 55 Go to 124 Go to 120
38. <u>INTERVIEWER CHECK ITEM:</u> Is this the first job at which this person worked in 1990?	No • 140	Yes ¹ Go to 39 No ² Go to 40





WORK AT EACH JOB BEFORE 1990



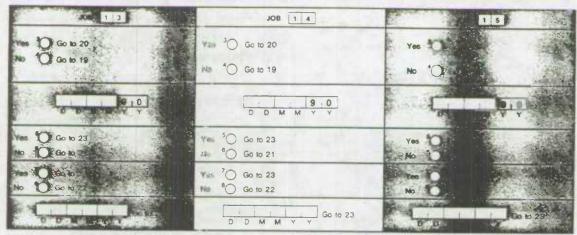
	1 1	J08 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes Go to 20	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?		D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 0 66 to 23	Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	b 22	Yes ⁷ Go to 23 No ⁶ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y

11. (Col. 11) THINKING BACK TO ... 'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?

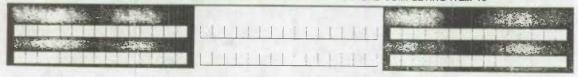
(Col.'s 12 to 15) FOR WHOM DID ... WORK?

JOB SEARCH ACTIVITIES BEFORE STARTING WORK AT EACH JOB

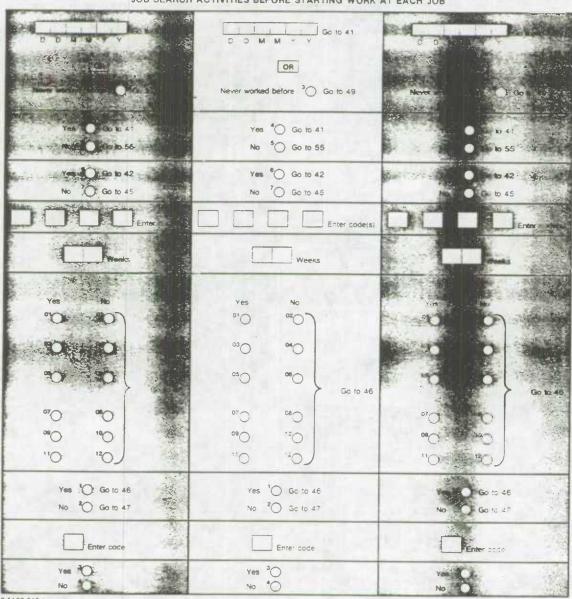
	ACCOUNT THE RESIDENCE OF	A STATE OF THE STA			
39. PRIOR TO STARTING THIS JOB OR BUSINESS ON (repeal date in Item 19). SEEMS TO HAVE A PERIOD OF NOT WORKING AT ANY JOB. WHEN DID THIS PERIOD START?		to 43	D D M	M Y Y	to 41
PERIOD START?		46		OR	
	77	•	Never worked	before * Go	to 49
49. IS THERE A PERIOD OF A WEEK OR MORE IMMEDIATELY PRIOR TO (repeat date in them 19) DURING WHICH DID NOT WORK AT ANY JOB?			Yes	Go to 41 Go to 55	
et. DID LOOK FOR WORK AT ANY TIME DURING THIS PERIOD?	Y No.		Yes No	⁶ Go to 42 ⁷ Go to 45	H
42. WHAT DID DO TO FIND WORK DURING THIS PERIOD? (Mark all methods reported)				e	inter code
R3. IN HOW MANY CONSECUTIVE WEEKS BEFORE THE START OF THIS JOB WAS LOOKING FOR WORK?				Weeks	
OID ANY OF THE FOLLOWING CAUSE DIFFICULTY WHEN LOOKING FOR WORK?			Yes	No	
a) Not having enough information about available jobs	•		010	0207	
b) Not having the skills or experience for available jobs	• 14		03	°40	
c) Not having enough education for available jobs	• 3	-6402	05	000	Go to
d) Having a long-term physical condition, mental condition, or health problem	0		07	°*O	
e) A shortage of jobs in the area	0		°°O	100	
f) Anything else?			0	-0)	
45. DID WANT A JOB AT ANY TIME DURING THIS PERIOD?	Yes • No • O		Yes	Go to 46 Go to 47	
46, WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS PERIOD?				Enter code	
17. DID RECEIVE UNEMPLOYMENT INSURANCE SENEFITS DURING THIS PERIOD?	Yes		Yes	°0	



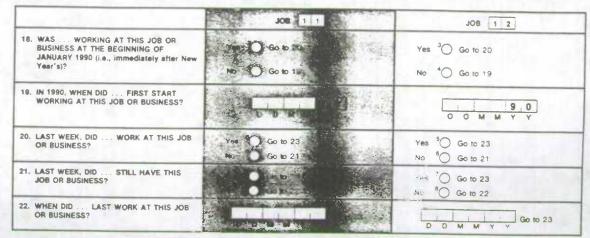
. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



JOB SEARCH ACTIVITIES BEFORE STARTING WORK AT EACH JOB

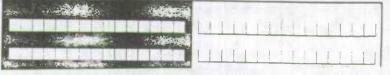


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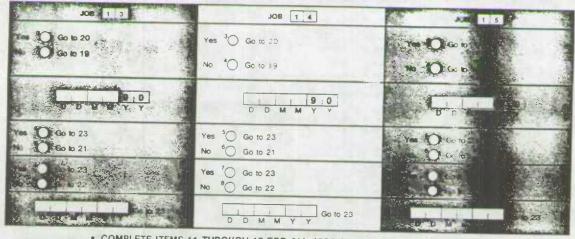


11. (Col. 11) THINKING BACK TO ...'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?

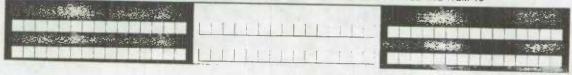
(Col.'s 12 to 15) FOR WHOM DID ... WORK?



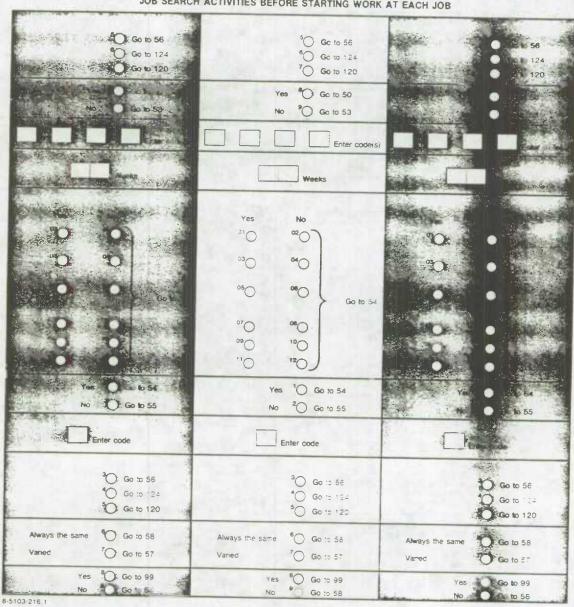
48. INTERVIEWER CHECK ITEM:	California and a second		
If Code 1 (Paid Worker) in Item 15	国际政治	58	5 Go to 56
If code 2 or code 6 in Item 15		0 (0) 124	6 Go to 124
Otherwise		o to topolice ha	7 Go to 120
Outprisses.		5 E A S A S A S A S A S A S A S A S A S A	O 00 10 120
IN THE WEEKS JUST PRIOR TO (repeat			Yes ⁸ Go to 50
date in item 19)?		0 /483	No ⁹ Go to 53
IO. WHAT DID DO TO FIND WORK DURING		1000	
THIS PERIOD? (Mark all methods reported)		and contains	Enter cod
51. IN HOW MANY CONSECUTIVE WEEKS			
JUST BEFORE THE START OF THIS JOB WAS LOOKING FOR WORK?	1 S. Carlot	A Secretary of the second	Weeks
WAS LOOKING FOR WORK?	The state of the s		
2. DID ANY OF THE FOLLOWING CAUSE	0400		
DIFFICULTY WHEN LOOKING FOR WORK?	185	221-8	Yes No
Not having enough information about available jobs	20		010 020
	776		
b) Not having the skills or experience for available jobs			030 040
c) Not having enough education for			050 080
available jobs			Go to
d) Having a long-term physical con-	a training	3.5 ES	
dition, mental condition, or health problem			070 080
e) A shortage of jobs in the area			0°. 0°°
			110 120
f) Anything else?			0 0)
3. DID WANT A JOB AT ANY TIME			Yes ¹ () Go to 54
DURING THIS PERIOD?		55	No ² Go to 55
		22 18 38	NO 0 GO 10 35
4. WAS THERE ANY REASON COULD NOT TAKE A JOB DURING THIS PERIOO?			
NOT TAKE A JOS DUNING THIS PENICO!			Enter code
S. INTERVIEWER CHECK ITEM:			
	**	Gc to 56	¹○ Go to 5€
If code 1 (Paid Worker) in Item 15 If code 2 or code 6 in Item 15	4	Go to 124	1 Go to 124
			1.5
Otherwise	1	120 to 120	²○ Go to 120
6. IN THE MONTHS THAT WORKED AT	Always the same	Go to 58	Always the same ⁶ Go to 58
THIS JOB IN 1990, OID HE/SHE ALWAYS WORK THE SAME NUMBER OF WEEKS, OR			
DID IT VARY FROM MONTH TO MONTH?	Varied (Go to 57	Varied Go to 51
7. WAS THIS BECAUSE OF AN ON-CALL	Yes a) to 99	Yes ^à ⊖ Go to 99
ARRANGEMENT?	No .	to 58	No 30 Go to 58



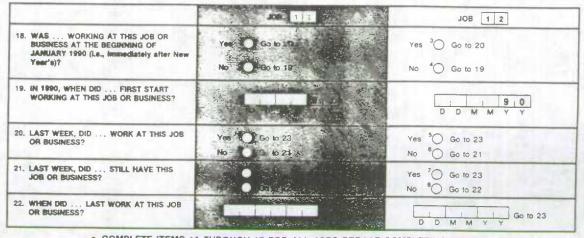
. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



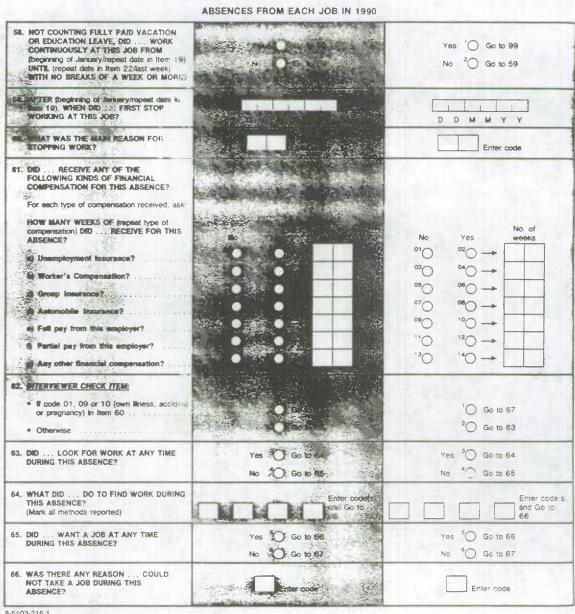
JOB SEARCH ACTIVITIES BEFORE STARTING WORK AT EACH JOB

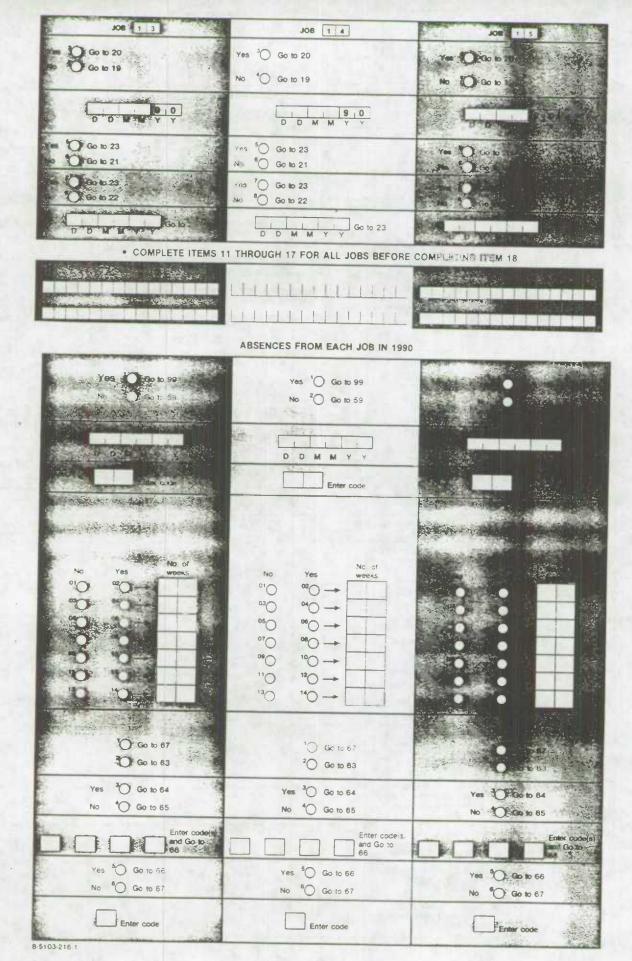


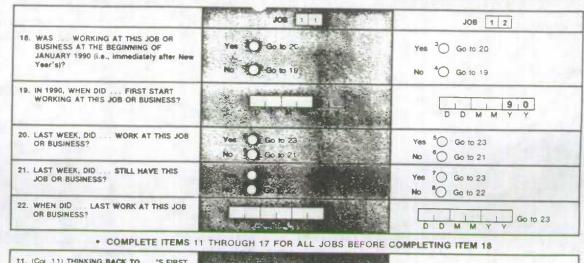
19





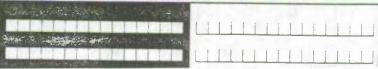


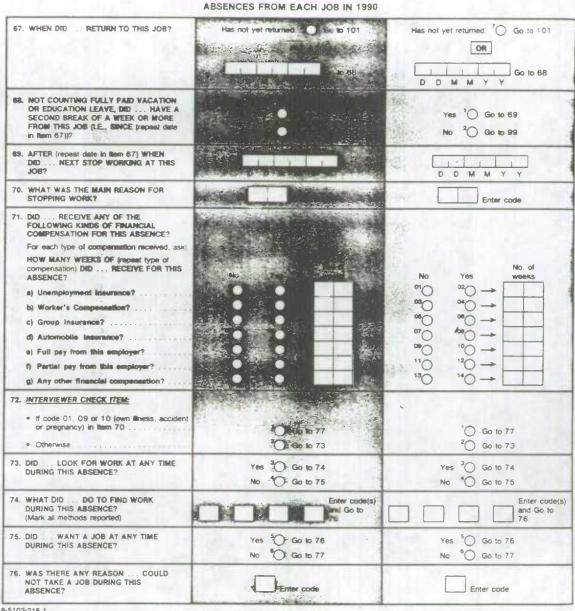


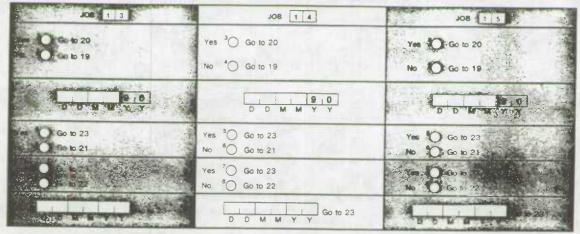


11. (Col. 11) THINKING BACK TO ... 'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?

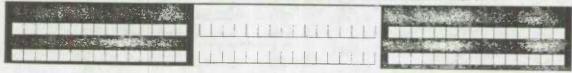
(Col.'s 12 to 15) FOR WHOM DID . . . WORK?



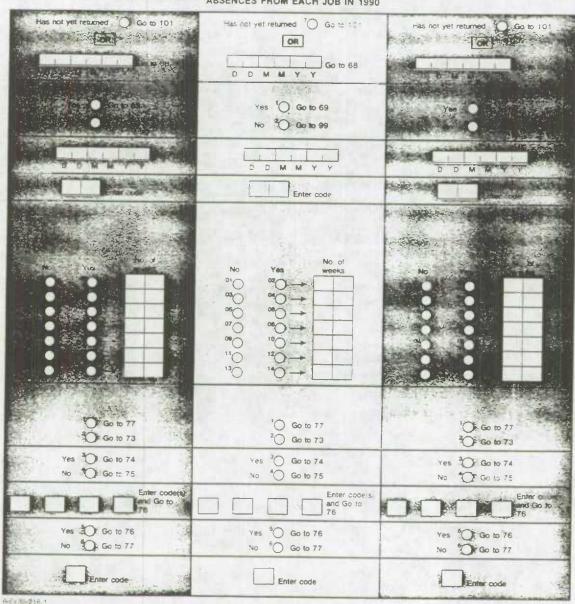




. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



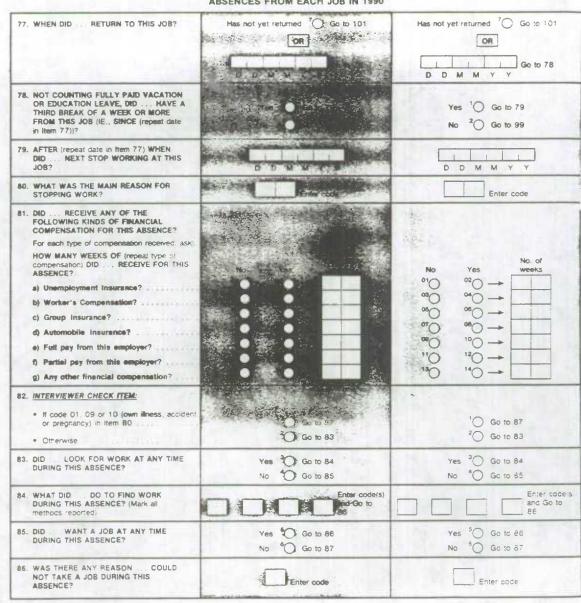
ABSENCES FROM EACH JOB IN 1990

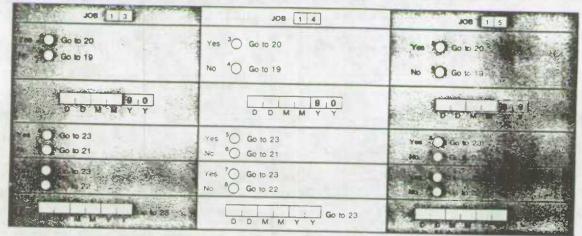


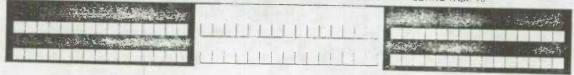
Malay and Principles	J08 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes 10 Go to 20	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?		D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes (C) Go to 23	Yes ⁵ () Go to 23
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	15	Yes ⁷ () Go to 23 No ⁶ () Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y

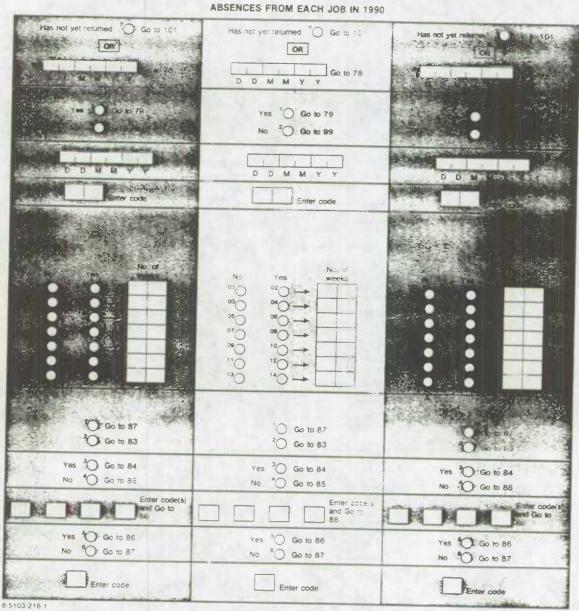


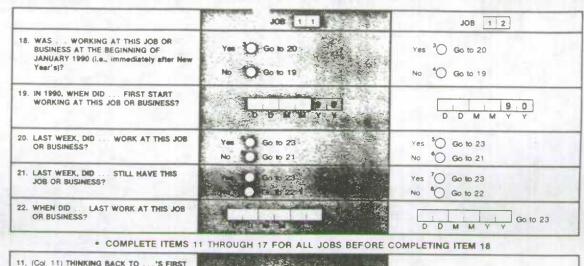
ABSENCES FROM EACH JOB IN 1990



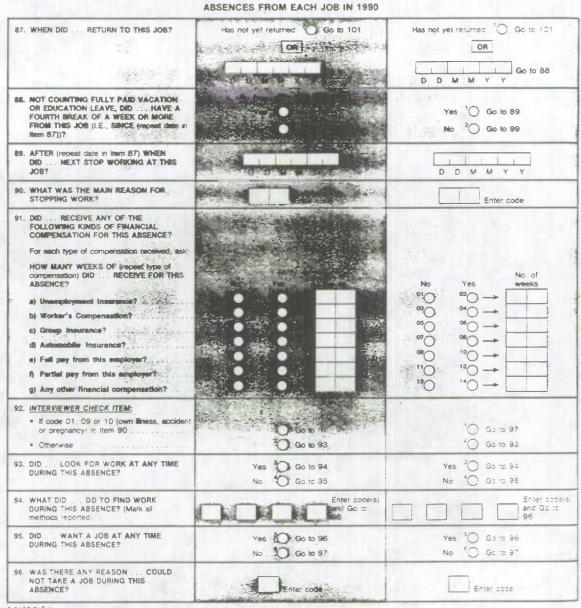


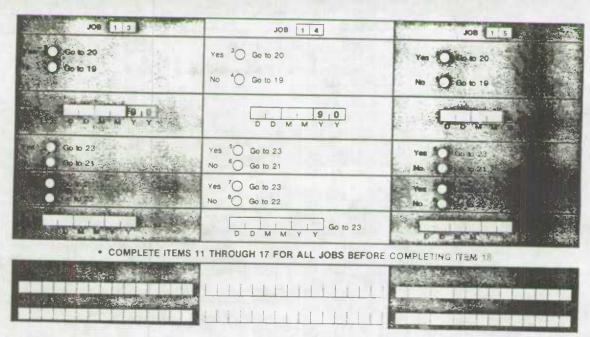


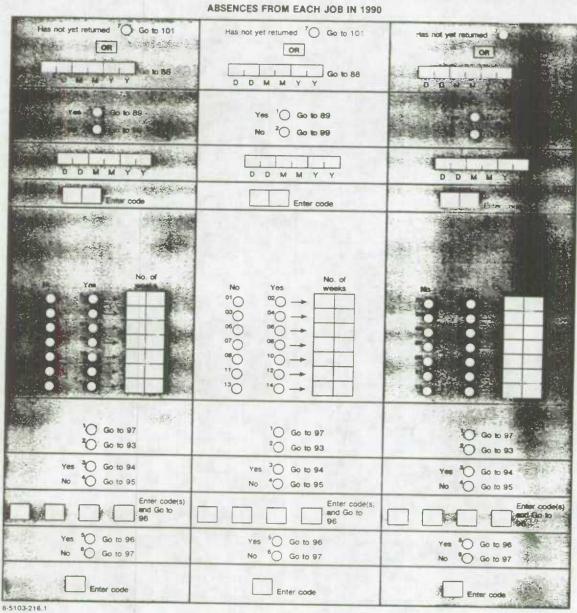


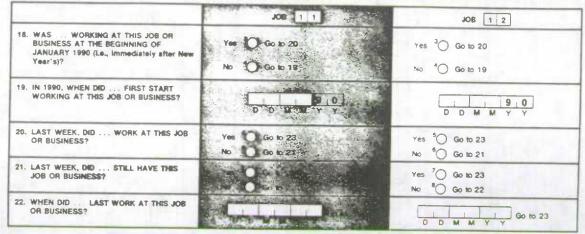








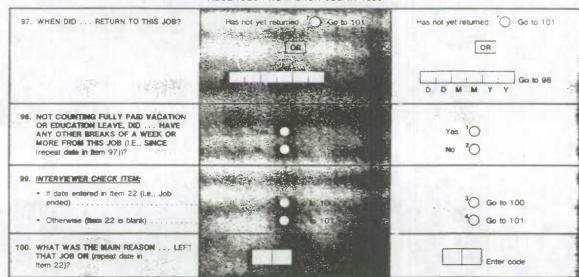




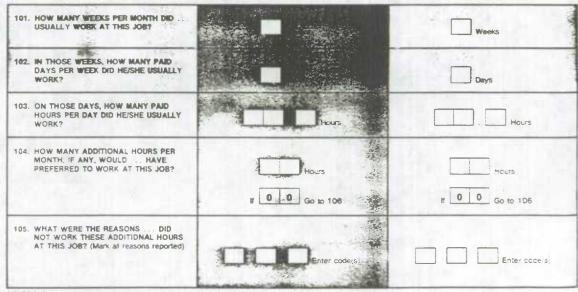
11. (Col. 11) THINKING BACK TO ... 'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HEISHE WORK?

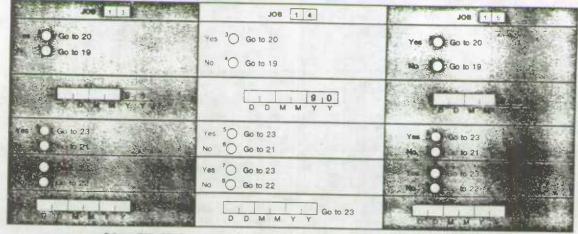
(Col.'s 12 to 15) FOR WHOM DID ... WORK?

ABSENCES FROM EACH JOB IN 1990

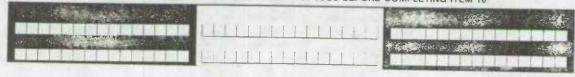


JOB CHARACTERISTICS FOR PAID WORKERS

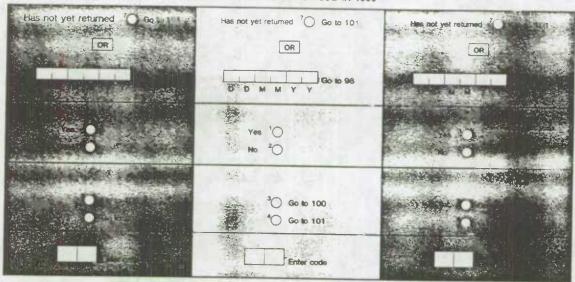




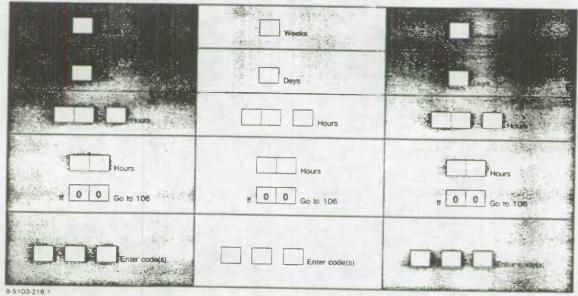
COMPLETE TEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



ABSENCES FROM EACH JOB IN 1990



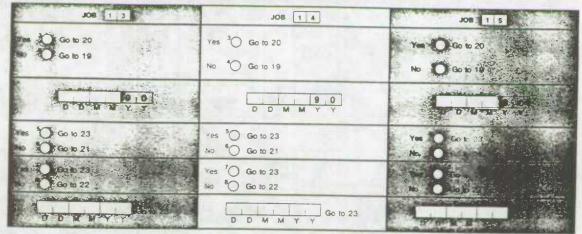
JOB CHARACTERISTICS FOR PAID WORKERS



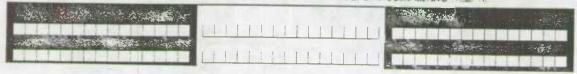
	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	Yes () 60 to 20 1 2 2 2	Yes ³ Go to 20
Year's)?	No 10 Go to 10	No ⁴ O Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	20 04 12 10	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes Ox Go to 23	√es ⁵ () Go to 23 No ⁶ () Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	12 Central 1	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	D	D D M M Y Y Go to 23

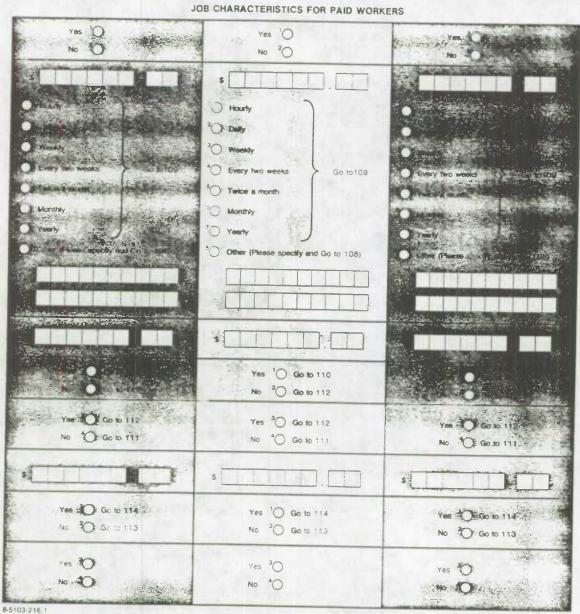


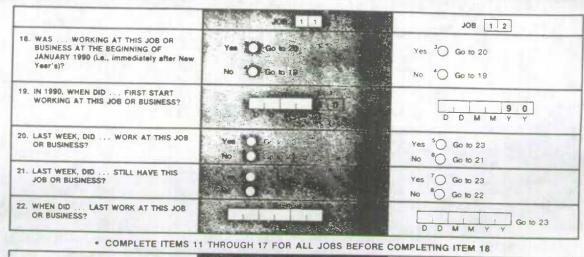
	10.	Yes 'O
06. AT THIS JOB WAS PAID BY THE HOUR?	Yes O	No ² O
07. AT THIS JOB WHAT WAS 'S USUAL WAGE OR SALARY BEFORE TAXES AND OTHER DEDUCTIONS FROM THIS EMPLOYER?	• Houry	s Hourty
	0.00	² O Daily
	0	Weekly 4 Every two weeks > Go to 109
	Every two weeks Go to 108	5 Twice a month
	*O Monthly	⁶ O Manthly
	10 ren	O Yearly
		Other (Please specify and Go to 108)
108. IN 1990, WHAT WERE 'S TOTAL EARNINGS AT THIS JOB?		s
109. IN 1990, DED RECEIVE ANY COMMISSIONS, TIPS, BONUSES, OR PAID OVERTIME FROM THIS JOB?	Go to 1:	Yes ¹ Go to 110 No ² Go to 112
110. WERE THESE COMMISSIONS, TIPS, BONUSES, OR PAID OVERTIME INCLUDED IN THE WAGE OR SALARY YOU JUST REPORTED?	Yes () Go to 112	Yes ³ Go to 112 No ⁴ Go to 111
111. IN 1990, WHAT WERE 'S TOTAL EARNINGS FROM THESE COMMISSIONS, TIPS, BONUSES OR PAID OVERTIME?	\$	s
112. IN THIS JOB WAS A MEMBER OF A UNION OR OTHER GROUP WHICH BARGAINS COLLECTIVELY WITH THIS EMPLOYER?	Yes ³ () Go to 114	Yes ¹ Go to 114 No ² Go to 113
113. ALTHOUGH WAS NOT A MEMBER OF A UNION, WERE HIS/HER WAGES COVERED BY A COLLECTIVE AGREE- MENT NEGOTIATED BY A UNION OR OTHER GROUP?	Yes ³ O .	Yes ³ O No ⁴ O



. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18

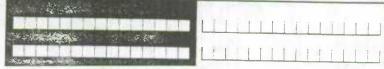




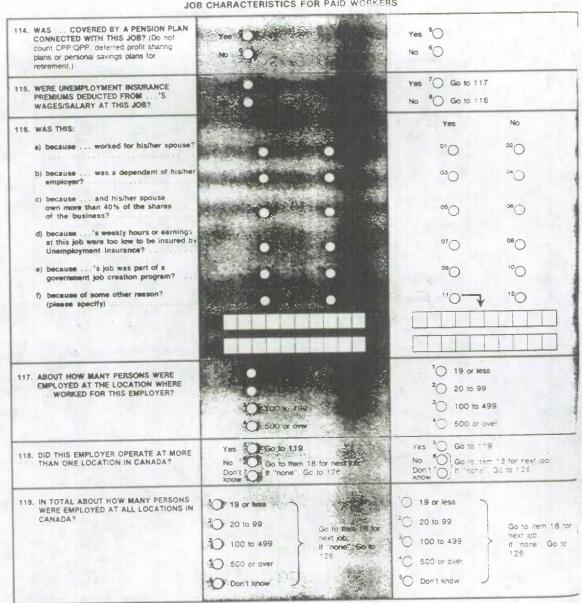


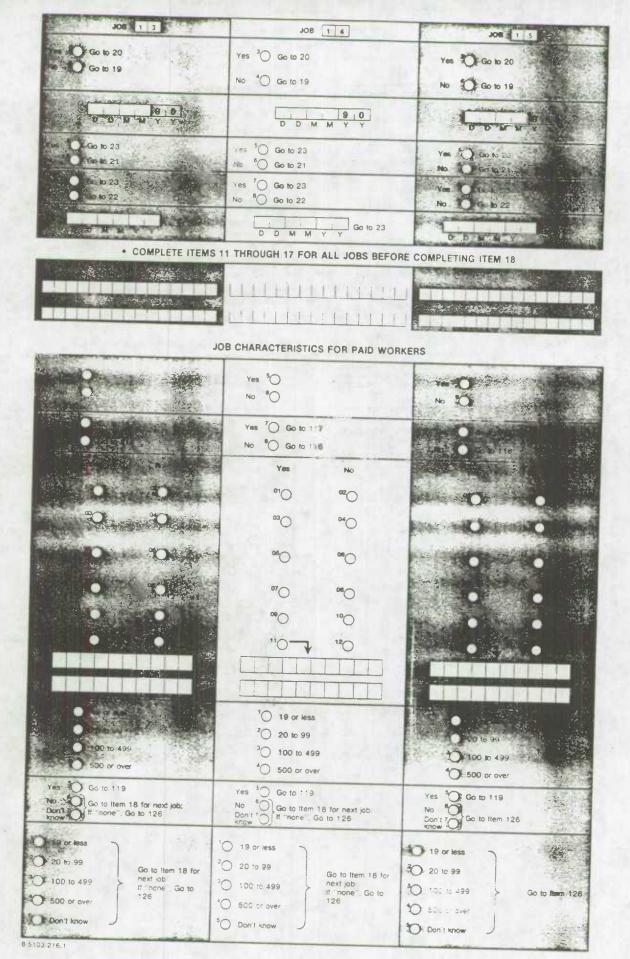
11. (Col. 11) THINKING BACK TO ...'S FIRST DAY OF WORK IN 1890, FOR WHOM DID HE/SHE WORK?

(Col.'s 12 to 15) FOR WHOM DID ... WORK?



JOB CHARACTERISTICS FOR PAID WORKERS

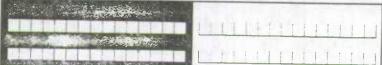




	J00 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes 10 Go to 20 No 10 Go to 19	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D D W Y Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes 1 Go to 23 No 1 Go to 21	Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	60 to 23 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes ⁷ Go to 23 No ⁶ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	Ga b 28 Su	D D M M Y Y

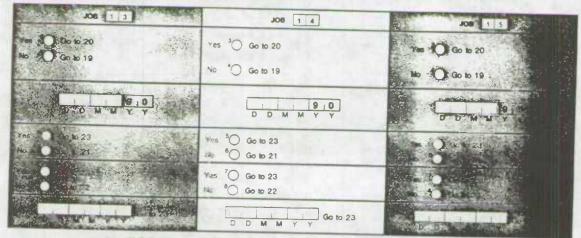
11. (Col. 11) THINKING BACK TO ... 'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HE/SHE WORK?

(Col.'s 12 to 15) FOR WHOM DID ... WORK?

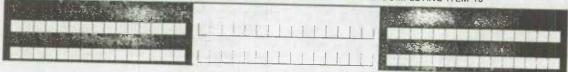


JOB CHARACTERISTICS FOR SELF-EMPLOYED WORKERS

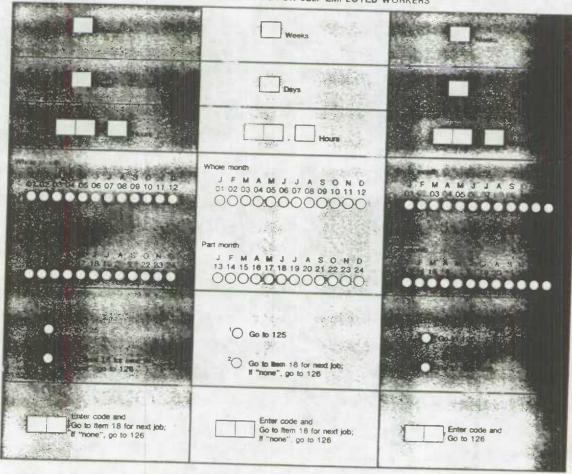
120. IN THE MONTHS THAT WORKED AT THIS BUSINESS, HOW MANY WEEKS PER MONTH DID HE/SHE USUALLY WORK AT IT?		Weeks
121. IN THOSE WEEKS, HOW MANY DAYS PER WEEK DID HE/SHE USUALLY WORK?		Days
122. ON THOSE DAYS, HOW MANY HOURS PER DAY DID HEISHE USUALLY WORK?		. Hours
123. FROM beginning of Januar, repeat date in Item 19) TO (repeat date in Item 22/last week), IN WHICH MONTHS DID WORK AT THIS BUSINESS FOR THE WHOLE MONTH AND IN WHICH MONTHS DID HEISHE WORK AT THIS BUSINESS FOR PART OF THE MONTH?	Whole month 01 02 03 04 05 06 07 08 09 10 11 12	Whole month J. F. M. A. M. J. J. A. S. O. N. D. 01:02:03:04:05:06:07:08:09:10:11:12
	J. F. H. A. M. J	Part month J F M A M J J A S O N D 13 14 15 16 17 18 19 20 21 22 23 24
124. INTERVIEWER CHECK ITEM:		
If date entered in Item 22	•	1 Go to 125
Otherwise (Item 22 is blank)		² O. Go to Item 1.8 for next job: If "none", go to 1.26
125. WHAT WAS THE MAIN REASON LEFT THAT BUSINESS ON (repeat date in item 22)?	Enter code and Go to item 18 for next job: M "none", so to 126	Enter dode and Go to item 18 for next job: Millingne" go to 128



. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18

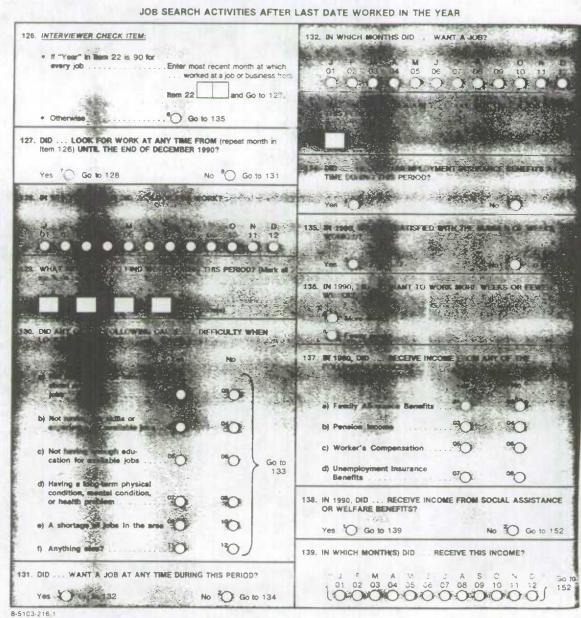


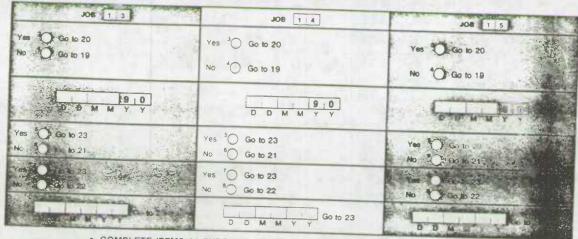
JOB CHARACTERISTICS FOR SELF-EMPLOYED WORKERS

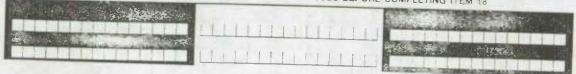


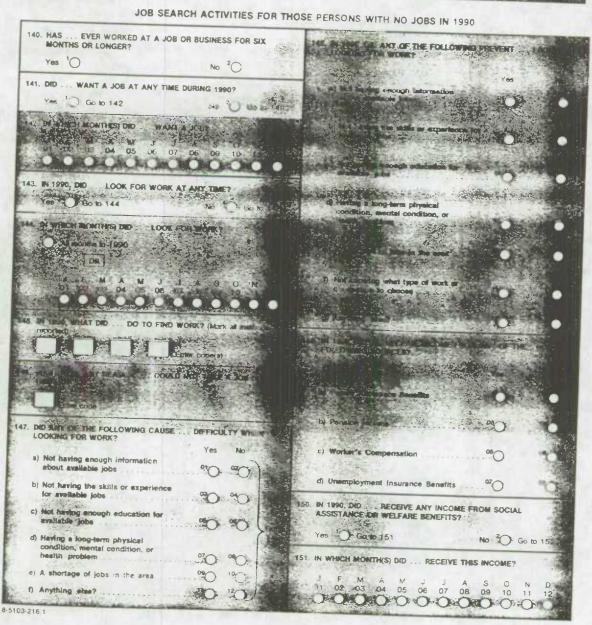
	J08 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)?	Yes 10. Go to 20.	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	No	No * Go to 19 D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes (C) Go to 23	Yes ⁵ Go to 23
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	0 00 22 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y Go to 23





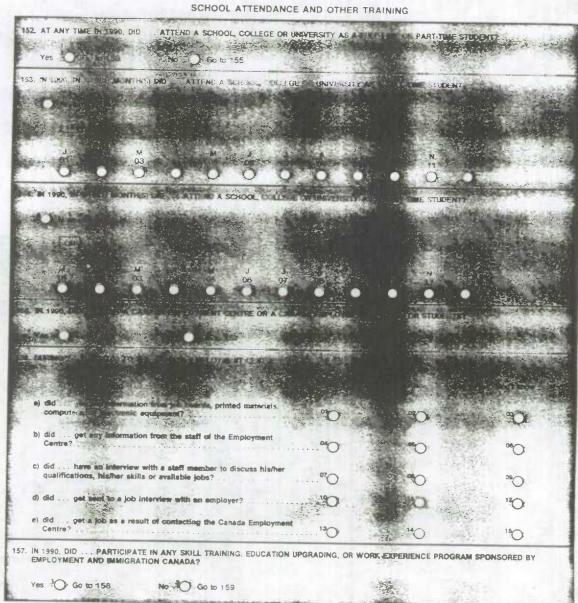


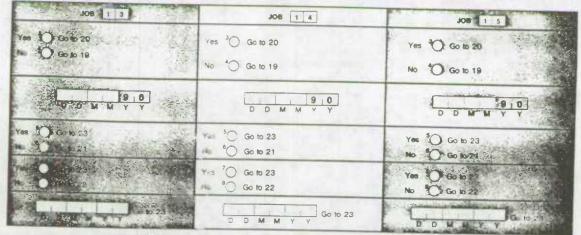




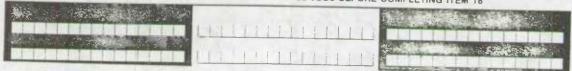
	JOB 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New	V= 101-00 to 20	Yes ³ Go to 20
Year's)?	No 10 60 to 19	No Go to 19
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D. Q. Mt. N. A. A. B. 144	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes (Go to 23	Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	10 100 to 23	Yes ⁷ Go to 23 No ⁸ Go to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y Go to 23

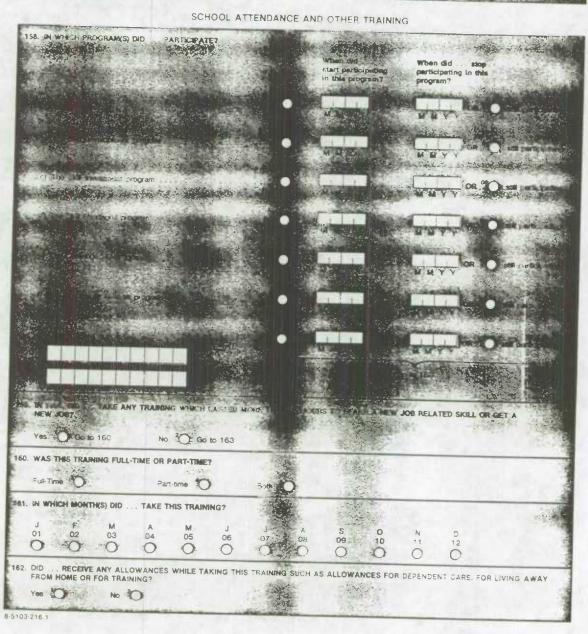






. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



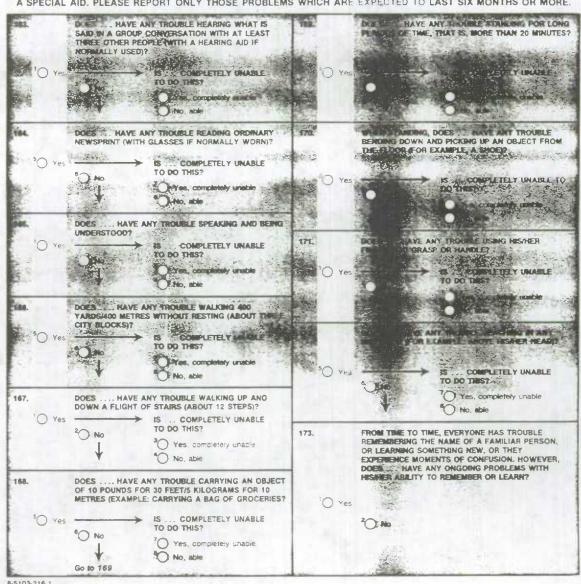


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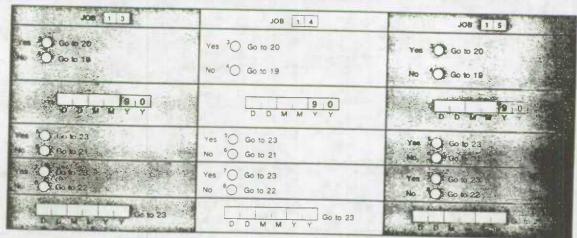
	J08 1 1	J08 1 2
 WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (i.e., immediately after New Year's)? 	Yes 10 Go to 20 : 25	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	D D M N Y Y	O D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	Yes (C) Go to 23	Yes ⁵ Go to 23 No. ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	No. O Go to 23	⁷ O Go to 23
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?	O D M M Y	D D M M Y Y Go to 23



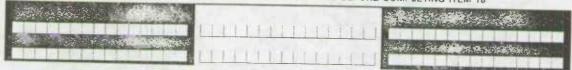
THE NEXT FEW QUESTIONS RELATE TO HEALTH AND THE IMPACT THAT CHRONIC HEALTH PROBLEMS HAVE ON EMPLOYMENT OPPORTUNITIES. FIRST, I WOULD LIKE TO ASK YOU ABOUT ... 's ABILITY TO DO CERTAIN ACTIVITIES, EVEN WHEN USING A SPECIAL AID. PLEASE REPORT ONLY THOSE PROBLEMS WHICH ARE EXPECTED TO LAST SIX MONTHS OR MORE.

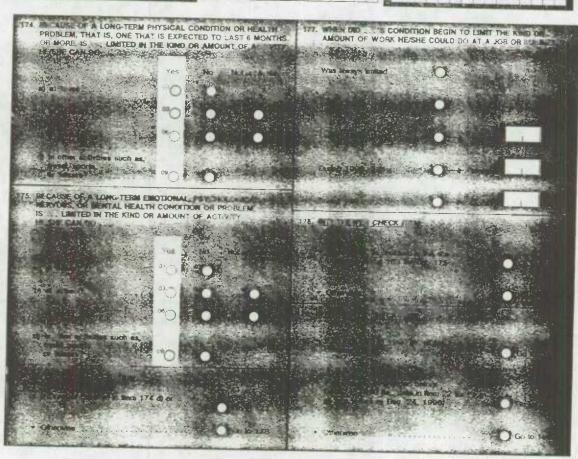


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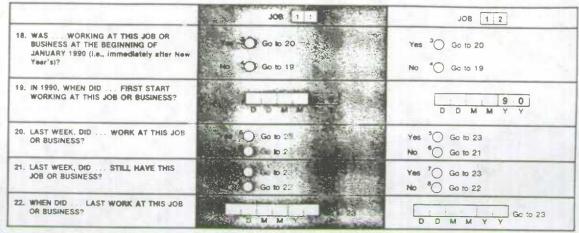


. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



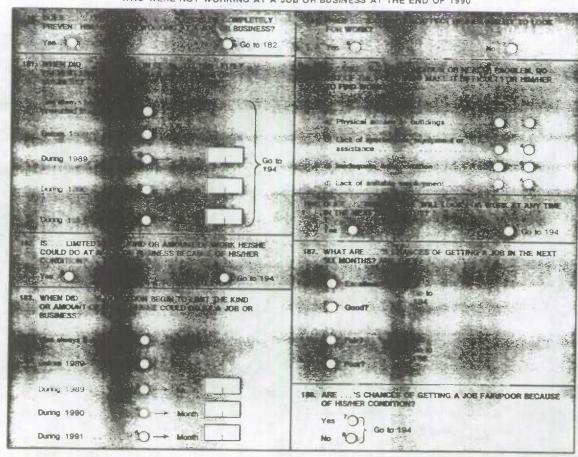


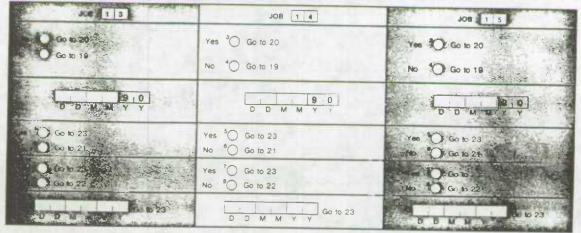
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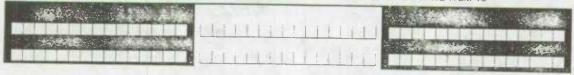


THESE QUESTIONS ARE FOR PERSONS
WHO WERE NOT WORKING AT A JOB OR BUSINESS AT THE END OF 1990

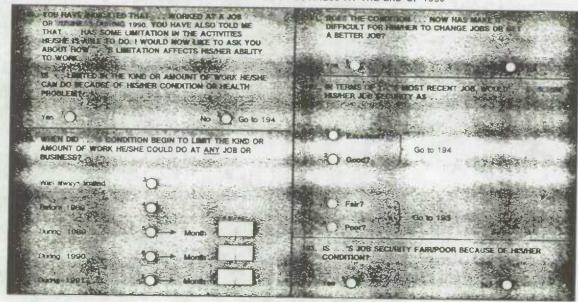




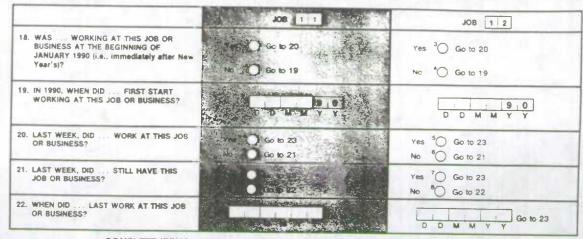
. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



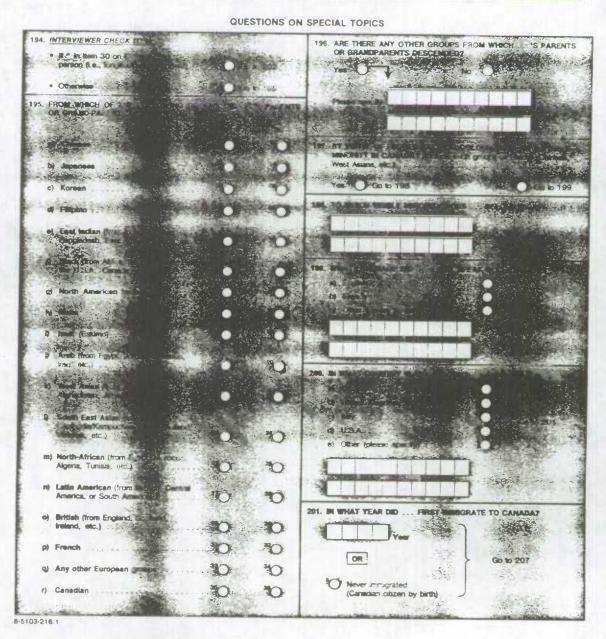
THESE QUESTIONS ARE FOR PERSONS WHO WERE WORKING AT A JOB OR BUSINESS AT THE END OF 1990

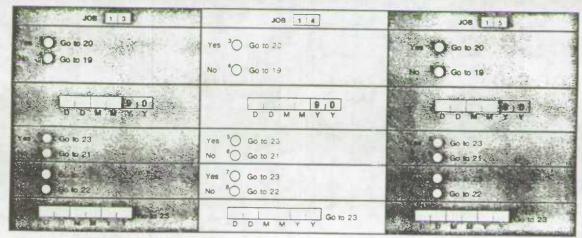


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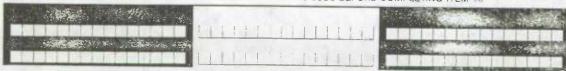


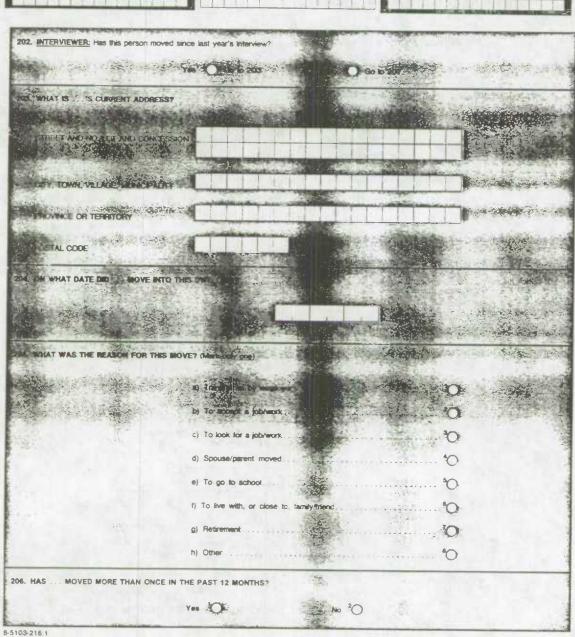






. COMPLETE ITEMS 11 THROUGH 17 FOR ALL JOBS BEFORE COMPLETING ITEM 18



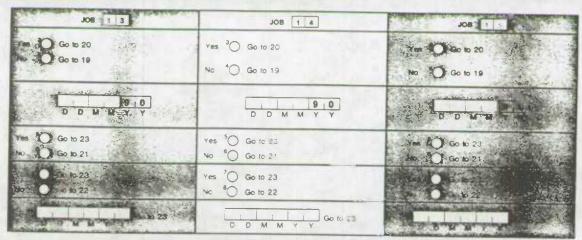


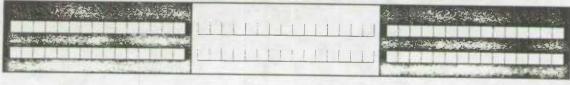
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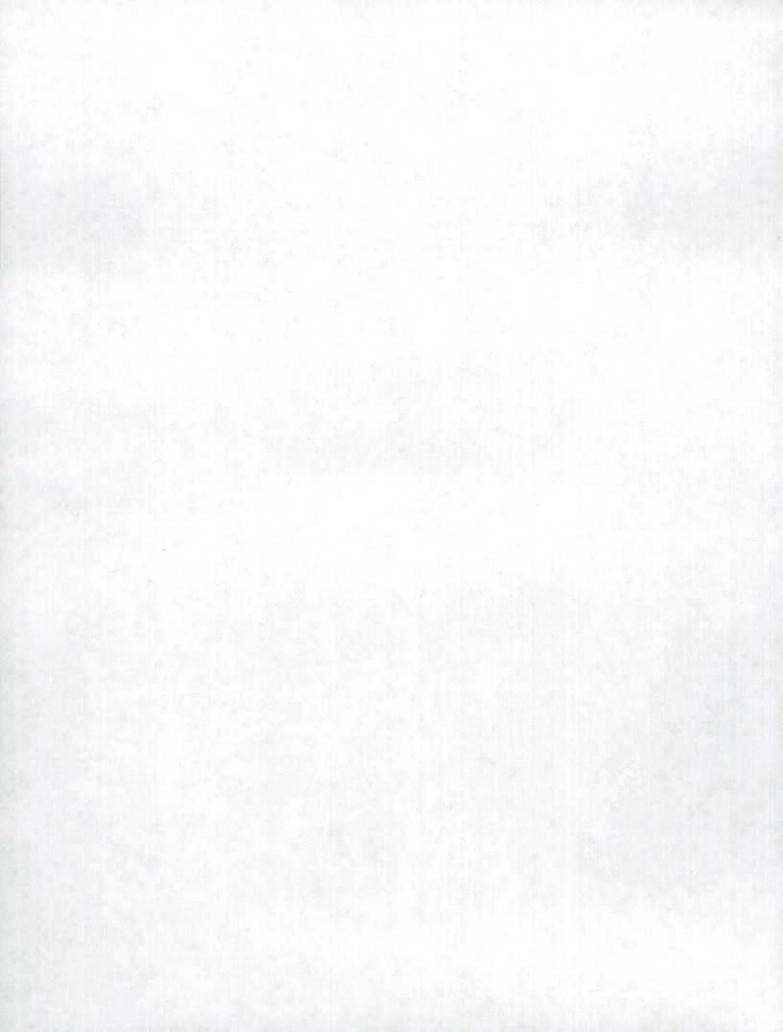
	J08 1 1	JOB 1 2
18. WAS WORKING AT THIS JOB OR BUSINESS AT THE BEGINNING OF JANUARY 1990 (Le., Immediately after New Year's)?	Value of the second of the sec	Yes ³ Go to 20
19. IN 1990, WHEN DID FIRST START WORKING AT THIS JOB OR BUSINESS?	370 5 5 4 4 1 7 Y	D D M M Y Y
20. LAST WEEK, DID WORK AT THIS JOB OR BUSINESS?	23 • 21	Yes ⁵ Go to 23 No ⁶ Go to 21
21. LAST WEEK, DID STILL HAVE THIS JOB OR BUSINESS?	• No • 22	Yes ⁷ Gio to 23 No ⁶ Gio to 22
22. WHEN DID LAST WORK AT THIS JOB OR BUSINESS?		D D M M Y Y Go to 23
COMPLETE ITEMS 1	1 THROUGH 17 FOR ALL JOBS BEFORE C	OMPLETING ITEM 18
11. (Col. 11) THINKING BACK TO'S FIRST DAY OF WORK IN 1990, FOR WHOM DID HEISHE WORK?		
(Col.'s 12 to 15) FOR WHOM DID WORK?		
207. INTERVIEWER: Was this interview conduct	ed mainly by telephone?	
Yes ² O No ³ O.		
208. HRD PAGE-LINE NO. OF INFORMATION S	OURCE	
HRO page-line number	4.47	
209. FINISH TIME		

210. INTERVIEWER: Read and complete the following section only for the head of each economic family in the household fee Identified on the Imbell. This survey is part of a multi-year project to study the work patterns of Canadians. We will need to recontact your household in a year from now to obtain additional information about jobs beid during 1991. In case your family moves before next January, we would like the name and address of a friend, relative or neighbour whom we could contact to obtain your family's new address or telephone number. I want to emphasize that we will contact this person only if your family has moved and then only to obtain your new address or telephone number. Refused OR NAME Given Name ADDRESS The same of Street and No./ Exit and Concession City, Town, Village, Municipality Province/ Territory TELEPHONE THANK YOU VERY MUCH FOR YOUR ASSISTANCE ON THIS PROJECT

8-5103-216.1







Canadian Travel Survey



Survey Month: January 1991

Title: Canadian Travel Survey

Sponsor: Tourism Canada

Survey Method: Personal/Telephone Interview

Sample Size: One civilian member, 15 years of age or over, from each household in

rotation group 4 throughout Canada. In addition, the survey was conducted in rotation group 5 in Nova Scotia and in rotation groups 5 and 6 in the provinces of Newfoundland, New Brunswick, Quebec and Alberta.

Objectives: This survey provides the sponsor with information on travel by Canadians

in terms of their contribution to the Canadian economy and the utilization of various travel related services (e.g., transportation, accommodation facilities). The data will also be used to provide an understanding of the Canadian traveller's habits, their destination, the purpose of their trips, the

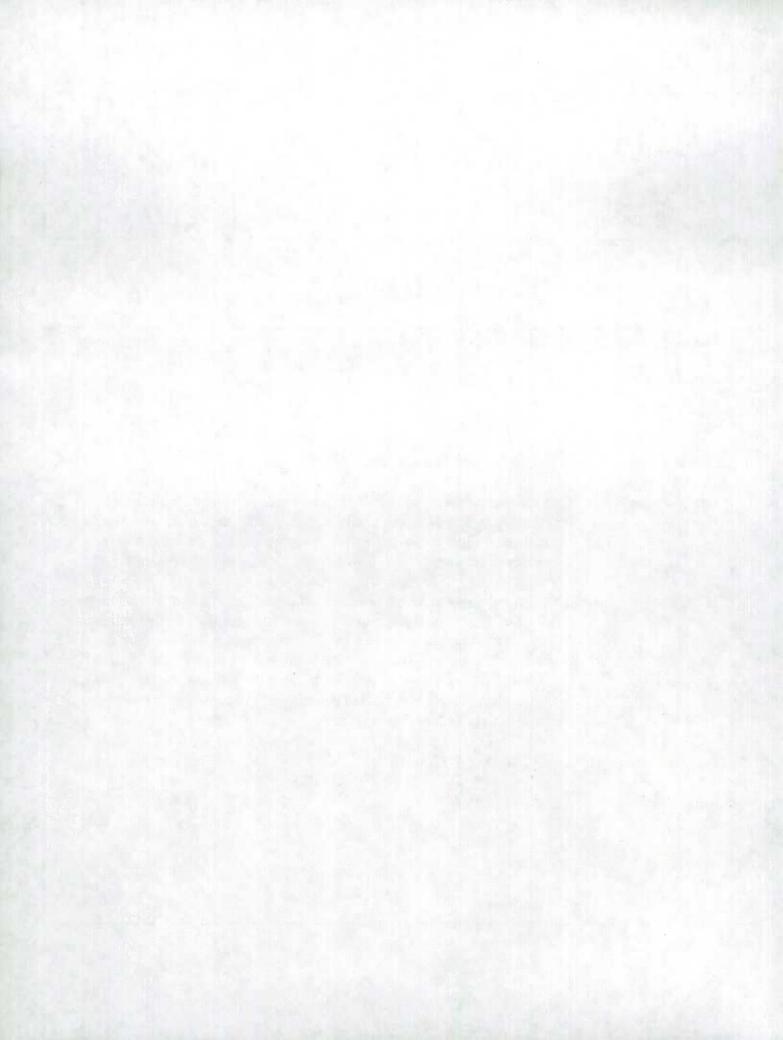
length of stay, etc., and to provide a picture of the socio-economic

characteristics of Canadians who travel.

Project Manager: Denis Lefebvre (951-4600)

Microdata: Yes Price No

X \$500.00



Household Surveys Division des Division enquêtes-ménages

Confidential when completed

Statistics Act, R.S.C. 1985, c S19.

Travel Survey (Fourth Quarter)

		Form 4		Docket No. 5 HRD page-line N	3 0 1 8 1 Survey Date 6 1
	INTRODUCTION AT				
	andomly selected from you	r household as a respon	ndent for the 1	990 Travel Survey.	7334
is he/she availa	ble?	Date:		Time:	
Yes 🔾>	Conduct interview	Call Back:		Call Back:	
No ○>	Make an appointment ———	Address:		Telephone	a No.
	period. Please do not inclu		Day, Rememb	rance Day, and Chri	eriod from stmas fell
during this three month as a m		ude any trips you took:		rance Day, and Chri	
during this three month as a n commit moving	period. Please do not inclu- nember of an operating cre- uting to work or school; g to a new residence.	ude any trips you took:	c, etc.;		stmas felf
during this three month as a m commit moving	period. Please do not inclu- nember of an operating cre- uting to work or school; g to a new residence.	or more which ended	c, etc.;		stmas felf
A. Did you take any other include: taking a vacation. C. Did you take any same of the control o	period. Please do not inclunember of an operating creuting to work or school; g to a new residence. Pas Trips of one night or residence or night or nigh	w of a bus, plane, truck w of a bus, plane, truck w more which ended many? more which ended d elatives, attending a many?	during this No uring this the wedding, fail	three month period ree month period r or festival, etc.	iod?
A. Did you take any busine B. Did you take any other include: taking a vacation	period. Please do not inclunember of an operating creuting to work or school; g to a new residence. Pas Trips of one night or residence or night or nigh	or more which ended many? more which ended delatives, attending a many?	during this No uring this the wedding, fail	three month period ree month period r or festival, etc.	iod?
A. Did you take any other include: taking a vacation. C. Did you take any same of month period?	period. Please do not inclumember of an operating creuting to work or school; g to a new residence. Pess trips of one night of the control o	or more which ended many? more which ended delatives, attending a many? miles (80 km) or more	during this No Ouring this the wedding, fair No Oo, one way, for	three month period ree month period r or festival, etc.	iod?
A. Did you take any other include: taking a vacation. C. Did you take any same of month period?	period. Please do not inclumember of an operating creuting to work or school; g to a new residence. Pas Trips of one night or mon, visiting friends or mon, visiting frien	or more which ended many? more which ended delatives, attending a many? miles (80 km) or more many?	during this No Ouring this the wedding, fair No Oo, one way, for	three month period ree month period r or festival, etc.	iod?
A. Did you take any other include: taking a vacation. C. Did you take any same of	period. Please do not inclumember of an operating creuting to work or school; g to a new residence. Pess trips of one night or reson, visiting friends or resonance of the visiting friends or resonance or resonance of the visiting friends or resonance or reso	or more which ended many? more which ended delatives, attending a many? many? Go to 10 2 Go to 29 C above: Enter total nurlatement to the responde	during this No Ouring this the wedding, fair No One way, for	three month perior or festival, etc.	iod?

Canadä'

TRIP 1 BEGINNING WITH THE FIRST TRIP THAT ENDED DURING THIS PERIOD:	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting thends Visit a or relatives 01 Provincial Park 12
[nearest] CTY/TOWN	Visit a Regional/ Festivals or events 02 Municipal Park 13
PROVINCE FOR OFFICE USE ONLY	Shopping 03 Attend sports events 14
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place	Participate in sports or Sightseeing 04 outdoor activity Attend cultural events (specify) 15
that is furthest from his/her home)	e.g. plays, concerts 050
(Nearest) CITY/TOWN PROVINCE/STATE	Nightife/ swimming 16
COUNTRY (If outside Canada) FOR OFFICE USE ONLY	Dining at Other water sports 17
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	high quality restaurants ⁰⁷ Visit a Golfing
Miles10	theme park 08 Hunting 19
Kilometres 20 Enter number	Visit zoo/museum/ natural display º9 Fishing 20
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN	Visit a
THIS HOUSEHOLD WENT ON THIS TRIP?	National Park 10 Cross country skiing
under 15 years 15 years and over	Historic site 110
15. WAS THIS A WEEK-END TRIP?	Other
Yes 1 No 2	None of the above 24
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number # 000 go to 19	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 99
Newfoundland 01 Saskatchewan 08 P.E.I. 02 Alberta 09 Nova Scotia 03 British Columbia 10	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR? Prepaid packages (i.e. package tours) 1 5 1 1 1 100
New Brunswick . 04 N.W.T. or Yukon . 11	Transportation to and from destination including expenditures for gas
Ontario os United States 12	Local transportation (i.e. taxis, bus, etc.) . 3 \$1 1 1 100
Ontario os United States 12 Manitoba 07 All other countries 13	Accommodation
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Food and beverages
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 \$ 1 1 1 1 100
Hotel (including tourist homes)	Other (souvenirs, etc.) 7
Motel 2	Total (if no breakdown given)
Camping or trailer park	24. IF "BUSINESS" MARKED IN 20 ASK:
Home of friends or relatives	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Private cottage or vacation home	An employer?
Commercial cottage or cabin	
Other (hostels, universities, etc.)	Yoursell?2 \%
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO	Other member(s) of your household? 3 %
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "euto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	25. IN WHICH MONTH DID THIS TRIP END? October 1 November 2 December 3
Automobile 1 Rail 3 Other 5 Bus 2 Boat 4 Air 6 Did you rent Yes 7 No 8	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1st TO DECEMBER 31, 1990? None 1 Go to 28 OR (Enter number)
a car? No 8	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)	October? November? 2 December? 3
Visiting friends/ relatives 1 Pleasure 2 Personal 3	28. INTERVIEWER CHECK ITEM:
Business 40 A convention 50	Last trip
Was it to attend a convention? Yes ⁶ No ⁷	Otherwise 2 Go to TRIP 2

TRIP 2 CONTINUING WITH THE NEXT TRIP	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting friends or relatives Visit a Provincial Park 12
(nearest) CITY/TOWN	Visit a Regional Festivals or events 02 Municipal Park 13
PROVINCE FOR OFFICE USE ONLY	Shopping
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon-	Participate in sports or
dent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Sightseeing
(Nearest) CITY/TOWN PROVINCE STATE	e.g. plays, concerts 050
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	entertainment 060 Swimming
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ?	Dining at high quality restaurants 07 Other water sports 17
(REPEAT DESTINATION FROM QUESTION 12)	Visit a theme park 060
Miles 10 Enter number	Visit zoo/museum/
<u> </u>	Visit a
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRUP?	National Park 10 Cross country skiing 21
under 15 years 15 years and over	Historic site
15. WAS THIS A WEEK-END TRIP?	Other
Yes 1 No 2	None of the above 24
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number # 000 go to 19	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES	
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 99
Newfoundland 01 Saskatchewan 06	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER
P.E.I. 02 Alberta 09	HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR ?
Nova Scotia . 03 British Columbia . 10	Prepaid packages (i.e. package tours) 1 51 1 1 100
New Brunswick 04 N.W.T. or Yukon 11	Transportation to and from destination including expenditures for gas 2 5 1 1 1 1 100
Quebec 05	Local transportation (i.e. taxis, bus, etc.) . 3 8 1 1 1 1 100
Ontario oe United States 12	Accommodation
Manifoba 07 All other countries 13 18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Food and beverages
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment
Hotel (Including tourist homes)	Other (souvenirs, etc.)
Motel 2	Total (if no breakdown given) 8 5 1 1 100
Camping or trailer park 3	24. IF "BUSINESS" MARKED IN 20 ASK:
Home of friends or relatives	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Private cottage or vacation home	An employer?
Commercial cottage or cabin	Yourself? 2 9%
Other (hostels, universities, etc.)	Other member(s) of your household?
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include	25. IN WHICH MONTH DID THIS TRIP END?
as "other" motorcycles and bicycles. (Mark one only.)	October 1 November 2 December 3
Automobile 1 Rail 3 Other 5 Bus 2 Boat 4 Air 6 Did you rent Yes 7 No 6	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1st TO DECEMBER 31, 1990? None 1 Go to 28 OR (Enter number)
a car	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)	October? 1 November? 2 December? 3
Visiting friends/ relatives 1 Pleasure 2 Personal 3	28. INTERVIEWER CHECK ITEM:
Business	Last trip 1
Was it to attend a convention? Yes ⁶ ○ No ⁷ ○	Otherwise 2 Go to TRIP 3

TRIP 3 CONTINUING WITH THE NEXT TRIP	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting friends or relatives 01 Provincial Park 12
(nearest) CITY/TOWN	Visit a Regional/ Festivals or events
PROVINCE FOR OFFICE USE ONLY	Shopping 03 Attend sports events 14
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respon-	Participate in sports or Sightseeing ⁰⁴ outdoor activity
dent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Attend cultural events e.g. plays, concerts os
(Nearest) CITY/TOWN PROVINCE/STATE	Nighttife/ Swimming 160
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	entertainment 06 Other water sports 17
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ?	high quality restaurants 07 Golfing
(REPEAT DESTINATION FROM QUESTION 12) Miles	theme park 08 Hunting 19
Kilometres 20	Visit zoo/museum/ natural display 99 Fishing 200
	Visit a
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	National Park 10 Cross country skiing 21
under 15 years 15 years and over	Visit an Historic site
	Other 23()
15. WAS THIS A WEEK-END TRIP? Yes 1 No 2	None of the above 24
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number # 000 go to 19	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 99
Newfoundland o1 Saskatchewan oe	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
P.E.I. 02 Alberta 09	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
Nova Scotia 03 British Columbia . 10	Prepaid packages (I.e. package tours) 1 1 1 100
New Brunswick . 04 N.W.T. or Yukon . 11	Transportation to and from destination including expenditures for gas
Quebec 05	Local transportation (i.e. taxis, bus, etc.) 3 5 1 1 100
Ontario os United States 12	Accommodation 4 \$1 1 100
Manitoba 07 All other countries 13	Food and beverages 5 5 5 0
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 S 1 1 100
	Other (souvenirs, etc.)
Hotel (including tourist homes)	Total (If no breakdown given)
Camping or trailer park 3	24. IF "BUSINESS" MARKED IN 20 ASK:
Home of friends or relatives	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Private cottage or vacation home	FOR BY: An employer?
Commercial cottage or cabin	
Other (hostels, universities, etc.)	Yourself?
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO	Other member(s) of your household? 3 %
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	25. IN WHICH MONTH DID THIS TRIP END? October 1 November 2 December 3
Automobile 1 Rail 3 Other 5 Bus 2 Boat 4	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1st TO DECEMBER 31, 1990?
Air 6 -> Did you rent yes 7 No 60	None 1 Go to 28 OR (Enter number)
a Car	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)	October? 1 November? 2 December? 3
Visiting friends/ relatives 1 Pleasure 2 Personal 3	28. INTERVIEWER CHECK ITEM:
Business 40 — A convention 50	Last trip
Was it to attend a convention? Yes ⁶ ○ No ⁷ ○	Otherwise 2 Go to TRIP 4

TRIP 4 CONTINUING WITH THE NEXT TRIP	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting friends Visit a or relatives 01 Provincial Park 12
(nearest) CiTY TOWN	Festivals or events 02 Municipal Park 13
PROVINCE FOR DIFFICE USE ONLY	Shopping 03 Attend sports events 14
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Sightseeing
(Nearest) CITY TOWN PROVINCE:STATE	Nightlife/ entertainment 06 Swimming 16
COUNTRY (# outside Canada) FOR OFFICE USE ONLY 13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ?	Dirring at high quality restaurants 07 Other water sports 17
(REPEAT DESTINATION FROM QUESTION 12)	Visit a theme park 080
Miles 10 Enter number	Visit zoo/museum/
Kilometres	natural display 09 Fishing 20
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	National Park 10 Cross country skling 21
under 15 years 15 years and over	Visit an Historic site 110 Downhill skiing 220
	Other
15. WAS THIS A WEEK-END TRIP?	
Yes 10 No 20	None of the above 24
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number # 000 go to 19	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 990
Newfoundland 01 Saskatchewan 08	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER
P.E.I	HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
Nova Scotia 03 British Columbia 10	Prepaid packages (i.e. package (ours) 1 5 1 1 100
New Brunswick . 04 N.W.T. or Yukon 11	Transportation to and from destination including expenditures for gas2
Quebec 05	Local transportation (i.e. taxis, bus, etc.) . 3 6 1 1 1 100
Ontario oe United States 12	Accommodation 4 5 1 100
Manitoba 07 All other countries 13	Food and beverages 5 5 1 1 100
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 \$ 1 1 1 00
Hotel (including tourist homes)	Other (souvenirs, etc.)
Motel 2	Total of no breakdown given) 8 5 1 1 1 100
Camping or trailer park	24. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Home of friends or relatives	FOR BY:
Private cottage or vacation home	An employer?
Commercial cottage or cabin	Yourself? 2 %
Other (hostels, universities, etc.)	Other member(s) of your household?3%
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	25. IN WHICH MONTH DID THIS TRIP END? October 1 November 2 December 3
Automobile 1 Rail 3 Other 5 Bus 2 Boat 4 Air 6 Did you rent yes 7 No 6	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1st TD DECEMBER 31, 1990? None 1 Go to 28 OR (Enter number)
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)	October? 1 November? 2 December? 3
Visiting friends/ relatives 1 Pleasure 2 Personal 3	28. INTERVIEWER CHECK ITEM:
Business 40 A convention 50	
Was it to attend a convention? Yes 60 No 70	Last trip 1 Go to 29 Otherwise 2 Go to TRIP 5
*****	- Go to True S

TRIP 5 CONTINUING WITH THE NEXT TRIP	21. ON THIS TRIP. DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting friends Visit a or relatives 01 Provincial Park
(nearest) CITY/TOWN	Visit a Regional/ Festivals or events 02 Municipal Park 13
PROVINCE FOR OFFICE USE ONLY	Shopping
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Sightseeing 04 Participate in sports or outdoor activity 150 Attend cultural events
(Newest) CITY/TOWN PROVINCE/STATE	e.g. plays, concerts 050 Nightlife/ Swimming 160
COUNTRY (if outside Carada) FOR OFFICE USE ONLY	entertainmen1 06 Other water sports 17
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS?	high quality restaurants 07
(REPEAT DESTINATION FROM QUESTION 12)	VISIT 8 theme nank 080
Miles 10	Visit zoo/museum/
Kilometres 2)	natural display 09 Fishing 20
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	National Park 10 Cross country skiing 21
under 15 years 15 years and over	Visit an Historic site
	Other
15. WAS THIS A WEEK-END TRIP? Yes 1 No 2	None of the above 24
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE"
TRIP? Enter number # 000 go to 19	IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES	
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 99
	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE
Newfoundland 01 Saskatchewan 08	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR?
P.E.1 02 Alberta	le and
Nova Scotia 03 British Columbia . 10	Prepaid packages (i.e. package tours) 1 \$1 1 100 Transportation to and from destination
New Brunswick . 04 N.W.T. or Yukon . 11	including expenditures for gas
Quebec 05	Local transportation (i.e. taxis, bus, etc.) . 3 5 1 100
Ontario 06 United States 12	Accommodation 4 \$ 1 1 100
Manifoba 07 All other countries 13	- k
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 5 1 1 1 00
	Other (souvenirs, etc.)
Hotel (including tourist homes)	Total (if no breakdown given) 8 5 1 1 100
Camping or trailer park	24. IF "BUSINESS" MARKED IN 20 ASK:
Home of friends or relatives	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Private cottage or vacation home	An employer? 1 %
Commercial cottage or cabin	Yourself? 2 5%
Other (hostels, universities, etc.)	
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include	Other member(s) of your household? 3
as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	October : November 2 December 3
Automobile 1	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1st TO DECEMBER 31, 1990?
Air 8 Did you rent Yes 7 No 8	None 1 Go to 28 OR (Enter number)
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)	October? 1 November? 2 December? 3
Visiting friends relatives 1 Pleasure 2 Personal 3	28. INTERVIEWER CHECK ITEM:
Business 40 — A convention 50	Last trip
Was it to attend a convention? Yes 6 No 7	Otherwise 2 Go to TRIP 6

TRIP 6 CONTINUING WITH THE NEXT TRIP	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting friends Visit a or relatives 01 Provincial Park 12
(nearest) CITY-TOWN	Visit a Regional/ Festivals or events 02 Municipal Park
PROVINCE FOR OFFICE USE ONLY	Shopping 03 Attend sports events . 14
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Sightseeing 04 Participate in sports or outdoor activity Attend cultural events e.g. plays, concerts 05
(Nearest) CTTY/TOWN PROVINCE/STATE	Nightlife/ entertainment oe Swimming 16
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Dining at Other water sports 17
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS? (REPEAT DESTINATION FROM QUESTION 12)	high quality restaurants 07 Golfing 16
Miles 10)	theme park 050 Hunting 190
Kilometres 2 } Enter number	Visit zoo/museum/ natural display 090 Fishing 200
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Visit a National Park 10 Cross country skiing . 21
under 15 years 15 years and over	Visit an Mistoric site
	Other 230
15. WAS THIS A WEEK-END TRIP? Yes 1 No 2	None of the above 240
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS	22 15 1111017 1 111 2 111 111 111 111 111 111 111 1
TRIP? Enter number # 000 go to 19	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 99
Newfoundland 01 Saskatchewan 08	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER
P.E.I. 02 Alberta 09	HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR ?
Nova Scotia . 03 British Columbia . 10	Prepaid packages (i.e. package tours) 1 1 1 1 100
New Brunswick . 04 N.W.T. or Yukon . 11	Transportation to and from destination including expenditures for gas 2 5 1 1 100
Quebec os	Local transportation (i.e. taxis, bus, etc.) 3 81 1 100
Ontario 06 United States 12	Accommodation 4 5 100
Manitoba 07 All other countries 13 18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND	Food and beverages 5 5 1 1 100
HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Recreation and entertainment 6 6 1 1 1 100
Hotel (including tourist homes)	Other (souvenirs, etc.)
Motel	Total (if no breakdown given)
Camping or trailer park	24. IF "BUSINESS" MARKED IN 20 ASK:
Home of friends or relatives	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY:
Private cottage or vacation home	An employer?
Commercial cottage or cabin 6 Other (hostels, universities, etc.) 7	Yourself?
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO	Other member(s) of your household?
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, reeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.)	25. IN WHICH MONTH DID THIS TRIP END? October 1 November 2 December 3
Automobile 1 Rail 3 Other 5 Bus 2 Boat 4 Air 6 Did you rent Yes 7 No 8	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1 st TO DECEMBER 31, 1990? None ¹○ Go to 28 OR (Enter number)
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only)	October? 1 November? 2 December? 3
Visiting friends/ relatives 1 Pleasure 2 Personal 3	28. (NTERVIEWER CHECK ITEM:
Business 4 A convention 5	Last trip
Was it to attend a convention? Yes 8 No 7	Otherwise

TRIP TO CONTINUING WITH THE NEXT TRIP 11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TREP? PROJUNCE		
Provincial Park 120 Prov		
Festivals or events. 972 Municipal Park. 120 1.2. WHAT WAS VOER DESTINATION ON THIS TRIP? Processor deel went to more than one place on this true, enter name of place on the first perfect of the fi	11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	or relatives Provincial Park 12
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? If the respondent went to more blace on this try, enter name of place on the first place of the stock of the went to more blace on the first place of the stock of the went to more blace on the first place of the stock of the went to more blace on the first place of the stock of the went of the stock of the went of the stock of the went of the went of the stock of the went of the stock of the went of the went of the stock of the went of the went of the went of the stock of the went of the stock of the went of the went of the stock of the went of the stock of the went of the went of the stock of the went of the stock of the went of the went of the stock of the went of th	(nearest) CITY/TOWN	
14. WALA WAS YOUN DESTRATION ON HIS TRIP? IN A HISTORIC STATE COUNTY If ONION CONTROL IN A HISTORIC STATE COUNTY If ONION CARNOL FORM PROVIDED STATE COUNTY If ONION COUNTY If ONION CARNOL FORM PROVIDED STATE COUNTY IF ONION CARNOL FORM PROVIDED STATE COUNTY IF ONION CARNOL FORM PROVIDED STATE COUNTY IN ONION CARNOL FORM PROVIDED STATE COUNTY IN OUT OF THE	PROVINCE FOR OFFICE USE ONLY	Shopping
Newfoundard of Saskatchewan Series Serie	dent went to more than one place on this trip, enter name of place	Sightseeing 04 outdoor activity Attend cultural events (specify)150
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS?	(Nearest) CITY/TOWN PROVINCE STATE	Nightlife/ Swimming 180
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS 7 (REPEAT DESTINATION FARD OURSTION 12)		
Note Common Com	13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Visit a
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Enter number	Visit zoo/museum/
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS TRUP? Under 15 years 15 years and over		
Under 15 years 15 years and over		National Park 10 Cross country skiing 21
15. WAS THIS A WEEK-END TRIP? Yes \(\circ\) No 2 \(\circ\) 16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number \(\limits\) 1 H 000 go to 19 17. IN MYHIGH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OXERMICHT AND HOW MANY NIGHTS DID YOU STAY OXERMICHT AND HOW MANY NIGHTS DID YOU STAY OXERMICHT AND HOW MANY NIGHTS DID YOU SPEN DI N EACH ONE? Newfoundland of \(\limits\) Saskatchewan os \(\limits\) Alberta os \(\limits\) Nova Scotla os \(\limits\) British Columbia 10 \(\limits\) New Brunswick od \(\limits\) N.W.T. or Yukon 11 \(\limits\) New Brunswick od \(\limits\) N.W.T. or Yukon 11 \(\limits\) Accommodation to and from destination nickding expenditures for gas \(\limits\) Enclodes 30 \(\limits\) British Columbia 10 \(\limits\) Accommodation to and from destination nickding expenditures for gas \(\limits\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}{2}\) Local transportation (i.e. taxis, bus. etc.) 3 \(\frac{1}\) Local transportation (i.e. ta		Historic site 110 Downnill skiling 220
None of the above 24	15 WAS THIS A WEEK-END TRIP?	Other
TRIP? 17. IN WHINCH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE? Newfoundland or Saskitchewan os Special States of Territorial Saskitchewan os Special States of Territorial		None of the above 24
DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE? Newfoundland or Saskatchewan os Newfoundland or Alberta os Alberta os Newfoundland or Saskatchewan os Newfoundland or N	TRIP?	IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE
NewFoundard 0 of December 3 Descriptions of December 2 December 3 December 2 December 2 December 3 December 2 December 3 December 2 December 3 December 2 December 3 December 2 December 2 December 3 December 3 December 3 December 2 December 3	17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID	National park or
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE? Hotel (including tourist homes) Motel Camping or trailer park Home of friends or relatives Private cottage or vacation home Commercial cottage or cabin Other (hostels, universities, etc.) 19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers, include as "other" motorcycles and bicycles. (Mark one only.) Automobile 1 Rail 3 Other 5 Boat 4 Air 6 Did you rent yes 7 No 8 Did you rent yes 7 No 8 Total (if no breakdown given) a \$\frac{\begin{align*} \begin{align*} align*	P.E.I. 02 Alberta 09 Nova Scotia 03 British Columbia 10 New Brunswick 04 N.W.T. or Yukon 11 Ouebec 05 United States 12	TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR? Prepaid packages (i.e. package tours)
Camping or trailer park Home of friends or relatives Private cottage or vacation home Commercial cottage or cabin Other (hostels, universities, etc.) 19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.) Automobile 1 Raii 3 Other 5 Did you rent yes 7 No 8 Other 5 Did you rent yes 7 No 8 Other Mark one only.) 20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only.) Visiting friends relatives. 1 Pleasure 2 Personal 3 28. INTERVIEWER CHECK ITEM:	HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	le ool
Home of friends or relatives Private cottage or vacation home Commercial cottage or cabin Other (hostels, universities, etc.) 19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.) Automobile 1 Rail 3 Other 5 Bus 2 Boat 4 Air 6 Did you rent a car? 20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only.) 21. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only.) 22. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only.) 23. INTERVIEWER CHECK ITEM:		Total (if no breakdown given)
Other (hostels, universities, etc.) 19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.) Automobile 1 Rail 3 Other 5 Did you rent Yes 7 No 8 Did you rent Yes 7 No 8 OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1** TO DECEMBER 31, 1990? None 1 Go to 28 OR (Enter number) 20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) Visiting friends relatives 1 Pleasure 2 Personal 3 28. INTERVIEWER CHECK ITEM:	Home of friends or relatives	WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID FOR BY: An employer?
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.) Automobile 1 Rail 3 Other 5 Bus 2 Boat 4 Air 6 Did you rent a car? 20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) Visiting friends relatives 1 Pleasure 2 Personal 3 28. INTERVIEWER CHECK ITEM:		Yourself?
TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include as "other" motorcycles and bicycles. (Mark one only.) Automobile 1		Other member(s) of your household?
Automobile 1	TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers. Include	October 1 November 2 December 3
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) Visiting friends relatives 1 Pleasure 2 Personal 3 28. INTERVIEWER CHECK ITEM:	Bus 2 Boat 4	TAKE DURING THE PERIOD OCTOBER 1# TO DECEMBER 31, 1990?
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP? (Mark one only) Visiting friends relatives 1 Pleasure 2 Personal 3 28. INTERVIEWER CHECK ITEM:	a car?	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN
relatives 1 Pleasure 2 Personal 3 20. INTERVIEWER CHECK ITEM:		
Business 4		28. INTERVIEWER CHECK ITEM:
Was it to attend a convention? Yes 6 No 7 Otherwise	*	

TRIP 8 CONTINUING WITH THE NEXT TRIP	21. ON THIS TRIP, DID YOU PARTICIPATE IN ANY OF THE FOLLOWING ACTIVITIES (Read list and mark all that apply)
11. WHERE DID YOU LIVE WHEN YOU TOOK THIS TRIP?	Visiting friends visit a or relatives provincial Park 12
(nearest) CITY TOWN	Festivals or events 02 Municipal Park 13
PROVINCE FOR OFFICE USE ONLY	Shopping
12. WHAT WAS YOUR DESTINATION ON THIS TRIP? (If the respondent went to more than one place on this trip, enter name of place that is furthest from his/her home)	Sightseeing
(Nearest) CITY/TOWN PROVINCE/STATE	Nightife/ entertainment Ds Swimming 18
COUNTRY (if outside Canada) FOR OFFICE USE ONLY	Dining at Other water sports 17
13. APPROXIMATELY HOW FAR FROM YOUR HOME IS ? (REPEAT DESTINATION FROM QUESTION 12)	Visit a Gotfing
Miles 1 Enter number	theme park 080 Visit zoo/museum/
Kilometres . 2	natural display
14. INCLUDING YOURSELF, HOW MANY PEOPLE NOW LIVING IN THIS HOUSEHOLD WENT ON THIS TRIP?	Visit a National Park 10 Cross country skiing 21
under 15 years 15 years and over	Visit an Historic site
15. WAS THIS A WEEK-END TRIP?	Other 23
Yes 1 No 2	None of the above 24()
16. HOW MANY NIGHTS WERE YOU AWAY FROM HOME ON THIS TRIP? Enter number # 000 go to 19	22. IF "VISIT A NATIONAL PARK" OR "VISIT AN HISTORIC SITE" IS MARKED IN 21 ASK: WHAT WAS THE NAME OF THE NATIONAL PARK(S) OR HISTORIC SITE(S) YOU VISITED?
17. IN WHICH PROVINCES, TERRITORIES, OR OTHER COUNTRIES DID YOU STAY OVERNIGHT AND HOW MANY NIGHTS DID YOU SPEND IN EACH ONE?	enter code(s) Did not visit a National park or Historic site 99
Newfoundland 01 Saskatchewan 08 P.E.I. 02 Alberta 09 Nova Scotia 03 British Columbia 10 New Brunswick 04 N.W.T. or Yukon 11 Quebec 05 Ontario 06 United States 12 Manitoba 07 All other countries 13	23. INCLUDING CHARGES ON CREDIT CARDS, WHAT WERE THE TOTAL EXPENDITURES FOR YOURSELF AND ALL OTHER HOUSEHOLD MEMBERS WHO WENT ON THIS TRIP FOR? Prepaid packages (i.e. package tours) 1
18. IN WHAT TYPES OF ACCOMMODATION DID YOU STAY AND HOW MANY NIGHTS DID YOU SPEND IN EACH TYPE?	Food and beverages 5 S S S S S S S S S S S S S S S S S S
Hotel (including tourist homes)	Other (souvenirs, etc.)
Motel 2	Total (if no breakdown given) 8 5 1 1 1 100
Camping or trailer park 3 Home of friends or relatives 4	24. IF "BUSINESS" MARKED IN 20 ASK: WHAT PERCENTAGE OF THESE EXPENDITURES WERE PAID
Private cottage or vacation home	FOR BY: An employer? %
Commercial cottage or cabin	
Other (hostels, universities, etc.)	Yourself?
19. WHAT MEANS OF TRANSPORTATION DID YOU USE TO TRAVEL THE GREATEST DISTANCE ON THIS TRIP? Include as "auto" motor homes, jeeps, trucks, vans and campers, include as "other" motorcycles and bicycles. (Mark one only.)	25. IN WHICH MONTH DID THIS TRIP END? October 1 November 2 December 3
Automobile ¹○ Rail ³○ Other ⁵○ Bus 2○ Boat ⁴○ Air ⁶ ○ → Did you rent Yes ⁷ ○ No ⁸ ○	26. HOW MANY OTHER TRIPS IDENTICAL TO THIS ONE DID YOU TAKE DURING THE PERIOD OCTOBER 1st TO DECEMBER 31, 1990? None 1 Go to 28 OR (Enter number)
20. WHAT WAS YOUR MAIN REASON FOR TAKING THIS TRIP?	27. HOW MANY OF THESE IDENTICAL TRIPS ENDED IN October? 1 November? 2 December? 3
Visiting friends/ relatives 1 Pleasure 2 Personal 3	28. INTERVIEWER CHECK ITEM:
Business 4 A convention 5 Was it to attend a convention? Yes 6 No 7	Last trip 1

29. DURING THE NINE M OF ONE NIGHT OR	ONTH PERIOD FROM . MORE TO A DESTINA	JANUARY 1, 1990 TO SEP	TEMBER 30, 1990 D	ID YOU TAKE ANY NON-	BUSINESS TRIP(S)
	and to the	annin and	Yes	No 20	
		province?		² O	
	to some of	her province(s)?	³ O	40	
		ed States?	50	°O	
		n country other than the tes?	70	80	
30. FOR THE YEAR 1990 DEDUCTIONS? INCL	O, IN WHICH OF THE F	FOLLOWING RANGES WA	AS YOUR TOTAL H	OUSEHOLD INCOME BEF	ORE TAXES AND RENTS, ETC.
Less than \$10,000		\$30,000 to \$39,999		\$60,000 to \$69,999	
\$10,000 to \$19,999	20	\$40,000 to \$49,999		\$70,000 to 79,999	
\$20,000 to \$29,999	30	\$50,000 to \$59,999	•⊙	\$80,000 and over	•
		Not Stated			
31. HOW MANY PEOPLE	CONTRIBUTED TO TI	HIS HOUSEHOLD INCOME	E?		200
One	10	Three	30		
Two	20	Four or more	40		
32. ARE YOU A MEMBER	R OF A FREQUENT FL	YER PROGRAM?			
Yes ¹(No	20			
NOTES:					

Absence from Work 1991



Survey Month: February 1991

Title: Absence from Work 1991

Sponsor: Employment and Immigration Canada

Survey Method: Personal/Telephone Interview

Sample Size: All civilian members 15 to 69 years of age in rotation groups 3, 4 and 5

Objectives: These supplementary questions are designed to obtain information about

the absences from work by paid employees during 1990, which were due to illness, accident or pregnancy, and about the financial compensation they received as a result. The data from this survey provide government departments with important information on the amount of time lost from work by Canadians due to health reasons. This information also contributes

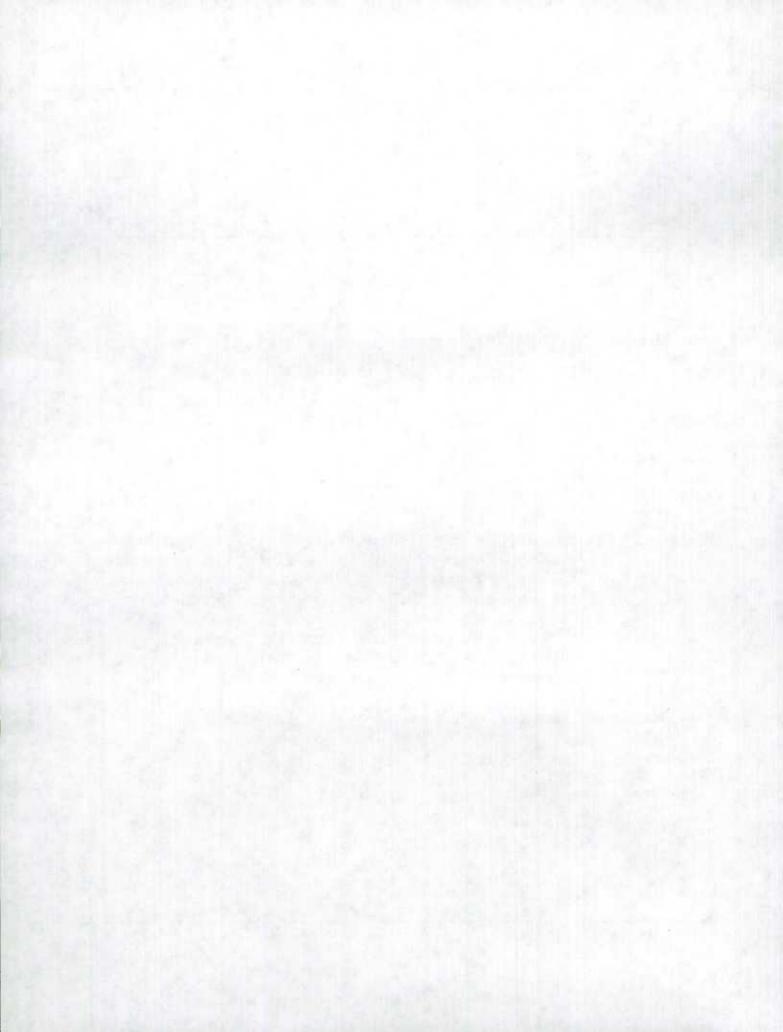
to the development of programs to assist those who experience such

absences.

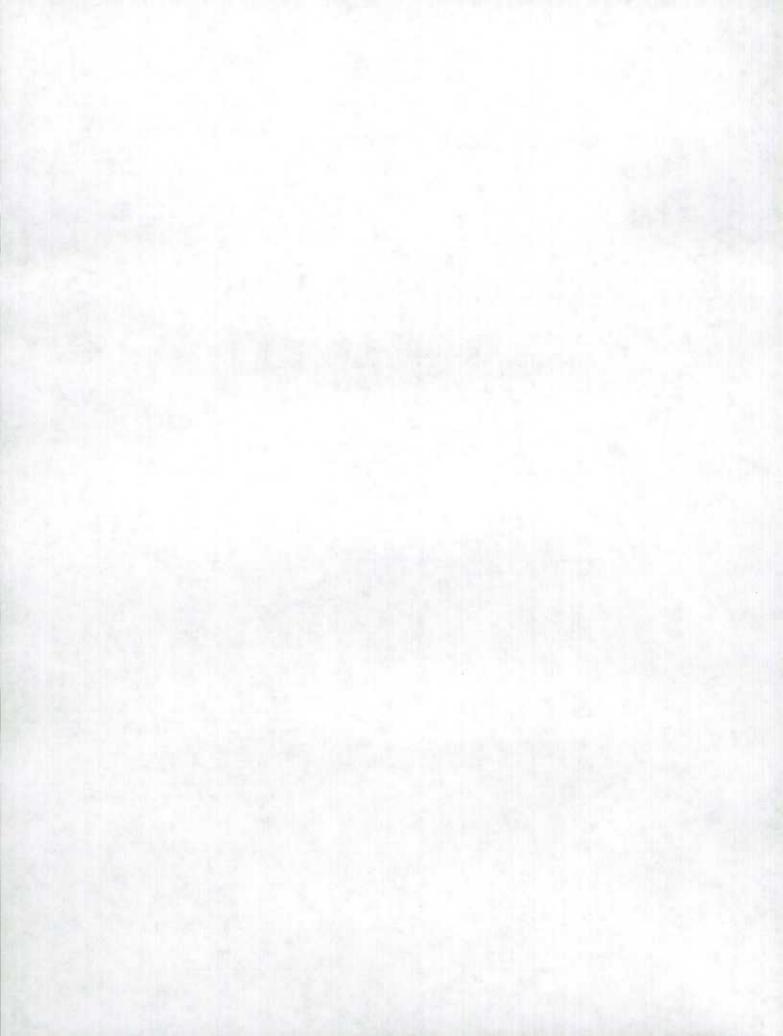
Project Manager: Denis Lefebvre (951-4600)

Microdata: Yes Price No

X \$500.00



2 3	4
page-line No. Given name Mo Yr	Surname 1 FORM NO.
TEBRUARY'S SUPPLEMENTARY QUESTIONS CONCERN'S ABSENCES FROM WORK DUE TO ILLNESS, ACCIDENT OR PREGNANCY, DURING THE LAST YEAR THAT IS, FROM JANUARY 1, 1990 TO DECEMBER 31, 1990.	17. What kind of financial compensation did receive for to last period? (Mark all types of compensation received)
HAT IS, FROM JANUARY 1, 1990 TO DECEMBER 31, 1990.	None 1 Go to 18
0. Did work as a paid employee in 1990?	Are there any others? (Mark all other types of compensation received)
Yes ¹ No ² Go to 24	For each type of compensation received, ask: How many weeks of
How many hours a week did usually work as a paid employee?	No. of weeks Unemployment Insurance
	Worker's Compensation 30
No. of hours	Group Insurance
	Automobile Insurance
2. At any time in 1990 did leave a job, or was absent from work for 2 or more consecutive weeks because of his/her own illness, accident or pregnancy?	Full pay from employer
Yes 1 No 2 Go to 23	Partial pay from employer
	Other financial compensation
3. How many separate periods of 2 or more consecutive weeks was unable to work due to his/her own illness, accident or pregnancy? Do not include any period that here. In the control of the contr	18. Interviewer Check Item:
began before January 1, 1990.	• # 0 2 or more periods in 13 1 Go to 19
No. of periods If none, enter 00, and go to 23	• Otherwise
	 The first questions asked about 's iast absence. The next 2 questions concern the absence before that.
4. Of these periods, was the <u>last period</u> due to illness, due to accident or due to pregnancy?	20. Was this previous period of absence due to illness, due to accident or due to pregnancy?
Illness Accident Pregnancy	Illness Accident Pregnancy
10 20 40	10 20 40
5. How many consecutive weeks was this last absence from beginning to end?	21. How many consecutive weeks was this previous absence? No. of weeks
No. of weeks	
1 Go to 17	22. Without including absences of 2 or more consecutive wee due to's own illness, accident or pregnancy, how mar weeks in 1990 was a paid employee?
Absence not ended ² Go to 16	No. of weeks
Up to the end of last week, how many weeks has been continuously absent from work?	Go to 24 23. How many weeks in 1990 was a paid employee?
No. of weeks	No. of weeks
IND. OF WEEKS	
	24. Interview:
	Proxy Non-proxy 1 2
NO1	TES See over for additional NOTES
	96
03-19 1990-10-24 STC/MLD/040-60122 FRANÇAIS AU VERSO	99



Current Population Profile



February 1991 **Survey Month:**

Title: **Current Population Profile**

Governments of Alberta and British Columbia Sponsor:

Personal/Telephone Interviews **Survey Method:**

All rotation groups in the Labour Force Survey -- approximately 59,000 Sample Size:

households

Objectives: The Current Population Profile provides information on the characteristics

of persons who have moved from another province, territory or country to

their current province of residence since the 1986 Census of Canada

(June 3, 1986).

Information was collected on their most recent move only.

Migrants were asked for the date of their most recent move; the reason for the move; the province, territory or country from which they moved; and their labour force status, occupation and industry in the month prior to the move.

This information, along with information from the current Labour Force

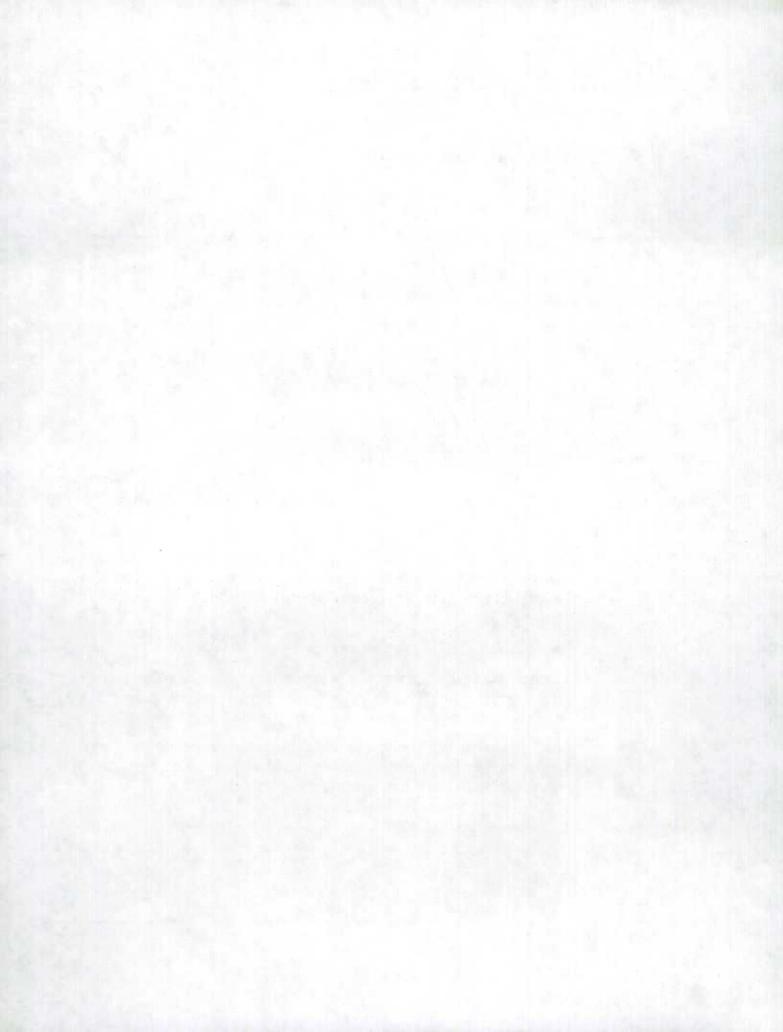
Survey, can be used to provide data on the family, education, age,

occupation and other characteristics of migrants.

Project Manager: Jack Beauregard (951-4019)

Microdata: Yes Price No

> X \$500.00



	CURRENT
~~	POPULATION
MAN	PROFILE

CONFIDENTIAL when completed

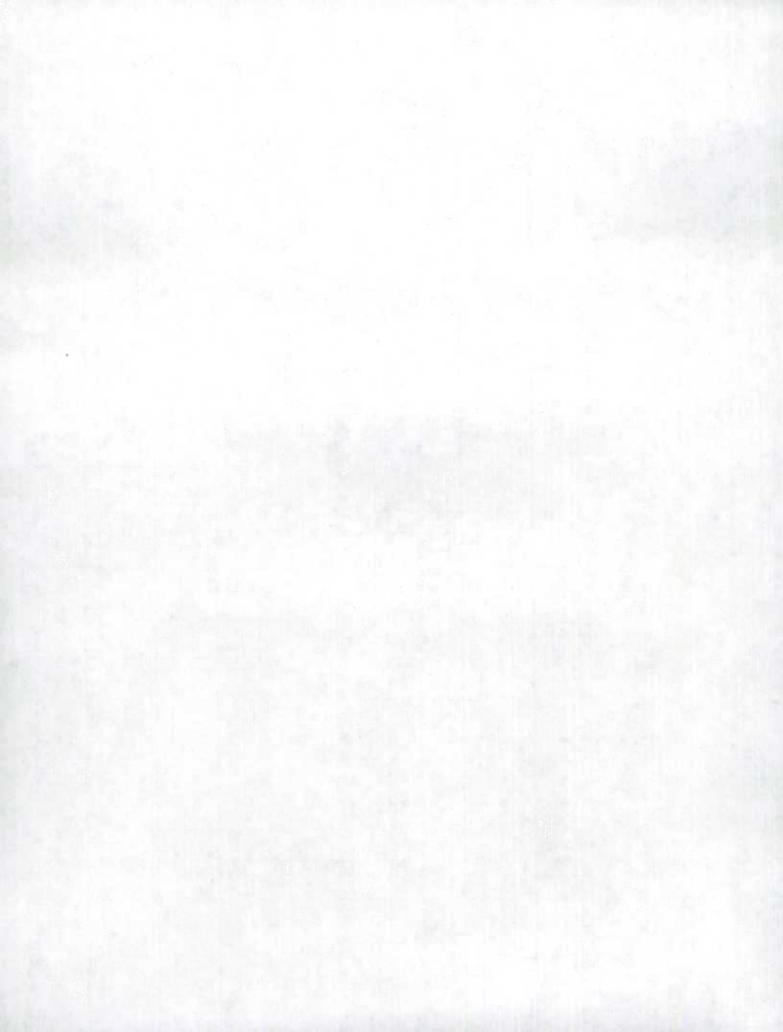
Collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

Docket No 2 Survey Date 3 Mo Yr	Assignment No 4
MRO page-line No. Given Name 5 6 1	Sumame 1 FORM NO 09
THE NEXT FEW QUESTIONS HAVE TO DO WITH CHANGES IN YOUR PLACE OF RESIDENCE IN THE LAST 5 YEARS.	14. Which of the following best describes's main activity during the one-month period prior to this move? (mark only one answer)
10. Has lived in any other province, territory or country since June 3, 1986, that is, since the last Census of Canada?	Working at a job or business
Yes 10 Go to 011	Looking for work
Yes Go to Q11	Attending school full-time
	Retired
THE FOLLOWING QUESTIONS REFER TO 'S MOST RECENT MOVE TO (province of interview)	Keeping house
11. In which province, territory or country did live before moving here?	Other
10 0	Don't know
Newfoundland ¹⁰ Saskatchewan ⁴⁷ Prince Edward Island Alberta ⁴⁸	15. For whom did last work before moving to this province?
Nova Scotia ¹² British Columbia ⁵⁹	(Name of business, government dept. or agency, or person.)
New Brunswick ¹³ Yukon	Never worked before
Quebec	moving to this province
Ontario 35 O USA	OR Don't know
Manitoba	OR LILILILIA III
	16. When did last work for this employer?
12. When did (last) move from (repeat answer from previous question)	Mo. Yr.
Mo. Yr.	17. What kind of business, industry or service was this?
13. What was the main reason that moved to present province?	(Give tull description: e.g., federal government, canning industry, forestry services.)
(mark only one answer)	
Transfer by employer	
To accept a job work	
To look for a job work	18. What kind of work was doing? (Give full description: e.g., office clerk, factory worker,
Spouse/parent moved to the province	forestry technician.)
To go to school	Don't know
To live with, or close to. Jamily/friend	OR 111111111111111111111111111111111111
Retirement	
Health	19. Was this work full-time or part-time?
Climate scenery	
Other 10 O	Full-time ² Part-time ³ Don't know ⁴
Don't know 11 O	20. Class of worker
_ NO	<u> </u>
1tem no.	99
99	99
FRANÇAIS AU VERSO	

8-5103-258 1990-10-25 STC HLD-035-04279

Statistics Statistique Canada

Canadä



Follow-up of 1986 Graduates



Survey Month: March 1991

Title: Follow-up of 1986 Graduates

Sponsor: Employment and Immigration Canada

Survey Method: Telephone Interview

Sample Size: 40,443 persons in 1991

Objectives: The survey was designed to determine the employment experience of

university and college graduates and provide information on rates of unemployment, under-employment, career expectations, and the relationship between post-secondary education and occupational experience. Information is given on fields of study, employment two to five years after graduation (occupations and industries), relationships between study and employment, annual salaries, percentage working/not working, and job

satisfaction.

All graduates of universities, colleges and trade vocational programs are

included.

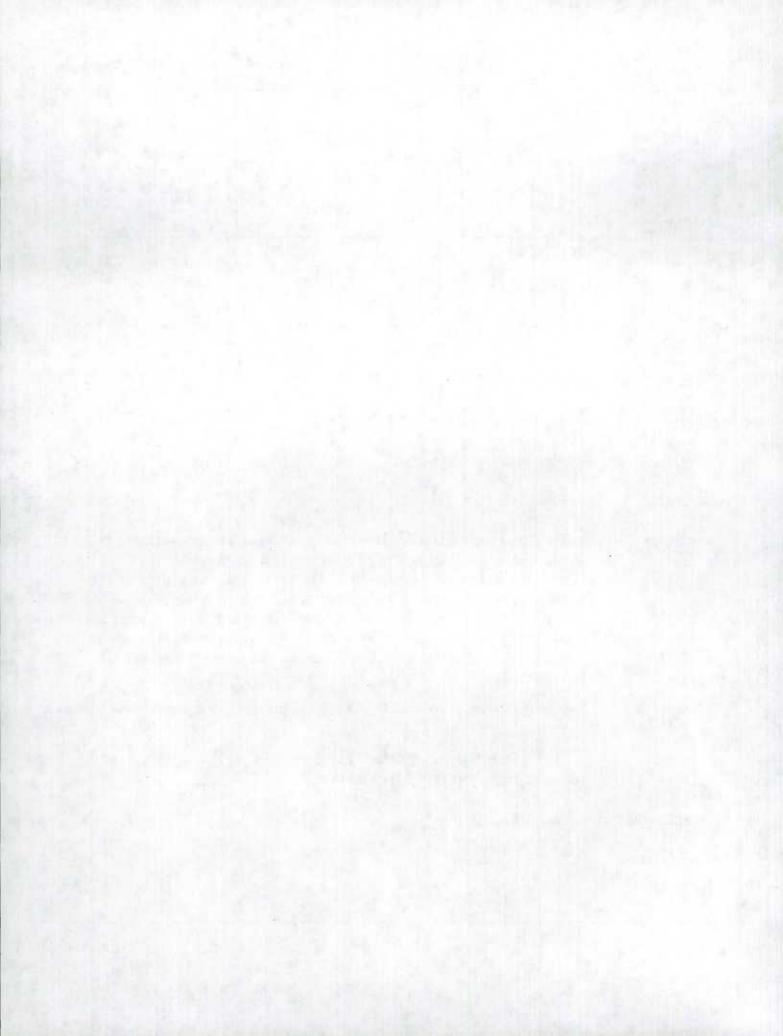
The first survey was conducted in 1988 for 1986 graduates; update

conducted in 1991 for 1986 graduates.

Project Manager: Bill Magnus (951-4577)

Microdata: Yes Price No.

X \$1,000.00





Form F86G-02

Confidential which templeted

Collected under the authority of the Statistics Act. Revised Statistics of Canada, 1985, Chapter \$19

PLACE LABEL HERE	INTERVIEWER NUMBER		
	INTERVIEWER NAME		
	SENIOR INTERVIEWER NAME		

RECORD OF CALLS / TRACING						
	Date	Start	Finish time	Comments - Results	Telephone Number	Int. Initials
1						
2						
3						
4						
5						
6						
7						
8						
9						
10					M PERCHA	
11						
12						
13						
14						
15						
16					The Park of the Park	
17						
18						
19						
20						

Time Period	Mon.	Tues	Wed	Thur	Fri.	Sat
09:00 - 12:00						
12.01 - 16:00						
16:01 - 19:00						
19:01 - 21:00	143)					

Total number of calls	1
Length of interview	2 minutes
Final Status	3

	3	
-	2	-

NTRODUCTION: After After			-	
are conducting a follow-up survey of 1986 graduates to add to the information you gave us in 1980. The survey is being carried out under the Statistics Act for Employment and Immigration Canada Your answers will be kept confidential and used only for statistical purposes. While your participation is voluntary, your assistance is essential if the resolts are to be accurate. SECTION A: LAST WEEK A1. Last week, did you work at a job or business? Yes	INTE	RODUCTION:	A7.	Last week, were you looking for a job?
is being carried out under the Statistics Act for Employment and Immigration Canada. Your answers will be kept confidential and used only for statistical purposes. While your participation is voluntary, your assistance is essential if the results are to be accurate. SECTION A: LAST WEEK A1. Last week, did you work at a job or business? Yes	are (conducting a follow-up survey of 1986 graduates to		Yes 1 O go to A8
Employment and Immigration Canada. Your answers will be kept confidential and used only for statistical purposes. While your participation is voluntary, your assistance is essential if the results are to be accurate. SECTION A: LAST WEEK A1. Last week, did you work at a job or business? Yes				
AB. Were you looking for a full-time job? ASECTION At LAST WEEK A1. Last week, did you work at a job or business? Yes	Emp	loyment and Immigration Canada. Your answers will		No
SECTION A: LAST WEEK A1. Last week, did you work at a job or business? Yes	purp	oses. While your participation is voluntary, your		Were you looking for a full-time job?
A1. Last week, did you work at a job or business? Yes	assis	stance is essential if the results are to be accurate.		Yes 3 O go to A11
A2. Last week, did you have a job or business at which you absent from work because of a temporary layoff? Yes 30 go to A3 A3. Were you looking for a job at which you would usually work 30 or more hours per week? Yes 30 go to A3 No 40 go to A4 A3. Were you absent from work because of a temporary layoff? Yes 50 go to B1 No 60 go to B2 A4. Last week, did you have a job to start at a definite date in the future? Yes 10 go to A5 No 20 go to A7 A5. Will you usually work 30 or more hours per week? Yes 30 go to C1 A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only). Fill-time work is under 30 hours a week 10 Own illness or disability 90 00 Waiting for recall (to former job) 90 Waiting for recall (to former job) 90 Waiting for replies from employer 97 Could not find the kind of job waried 98 Discouraged with looking 99 No reason given 90 Other reason (Specify) 90 Other reason (Specify) 90 A11. Since January 1988, did you ever have a full-time job which lasted six months or more? Yes 90 to D1 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 90 to D1 A13. Were you looking for a job at which you supally worked 30 or more hours per week? A5. What is the reason you will usually work less than 30 hours per week? (D0 not read list: check one only).	SEC	TION A: LAST WEEK		No 4 O go to A9
No 2 go to A2 A3. Were you absent from work because of a temporary layoff? Yes 3 go to B1 No 4 go to A4 A3. Were you absent from work because of a temporary layoff? Yes 5 go to B1 No 6 go to B1 No 6 go to A7 A5. Will you usually work 30 or more hours per week? Yes 7 go to A7 A6. What is the reason you will usually work less than 30 hours per week? (Do not read list; check one only.) A6. What is the reason you will usually work less than 30 hours per week? (Do not read list; check one only.) A6. What is the reason you will usually work less than 30 hours per week? (Do not read list; check one only.) A6. What is the reason you will usually work less than 30 hours per week? (Do not read list; check one only.) A6. What is the reason you will usually work less than 30 hours per week? (Do not read list; check one only.) A7. Since January 1988, did you ever have a full-time job which lasted six months or more? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week? A8. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week? A8. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more?	A1.	Last week, did you work at a job or business?		
What was the main reason you did not look for a job last week? (Do not read list; check one only.) A1. What was the main reason you did not look for a job last week? (Do not read list; check one only.) A2. What was the main reason you did not look for a job last week? (Do not read list; check one only.) A3. Were you absent from work because of a temporary layor? A4. Last week, did you have a job to start at a definite date in the future? A5. Will you usually work 30 or more hours per week? A6. What is you usually work 30 or more hours per week? A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) A7. Since January 1988, did you ever have a full-time job which lasted six months or more? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? A7. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more?		Yes ¹ O go to B1	A9.	
which you did not work? Yes 3		No		Yes 50 } an to A11
Yes	A2.			No 60 }
A3. Were you absent from work because of a temporary layoff? Yes		Yes 3 O go to A3	A10.	What was the main reason you did not look for a job last week? (Do not read list; check one only.)
A3. Were you absent from work because of a temporary layoff? Yes		No 4 O go to A4		Own illness or disability 01
Second only find part-time work Society	A3.	Were you absent from work because of a		
A4. Last week, did you have a job to start at a definite date in the future? Yes 10 go to A5 No 20 go to A7 A5. Will you usually work 30 or more hours per week? Yes 30 go to C1 No Waiting for replies from employer 07 Could not find the kind of job wanted 08 Could not find the kind of job wanted 09 Could not so was week? A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) Full-time work is under 30 hours a week 10 Could not find the kind of job wanted 10 Could				
A4. Last week, did you have a job to start at a definite date in the future? Yes		Yes		Going to school
A4. Last week, did you have a job to start at a definite date in the future? Yes		No 60)		
Yes 1 90 to A5 No 2 90 to A7 A5. Will you usually work 30 or more hours per week? Yes 3 90 to C1 No 4 90 to A6 Don't know 5 90 to C1 A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) Full-time work is under 30 hours a week 10 Did not want full-time work 2 Own illness or disability 3 Personal or family responsibilities 4 Going to school 5 Could only find part-time work 6 Discouraged with looking 99 Other reason (Specify) 10 A11. Since January 1988, did you ever have a full-time job which lasted six months or more? Yes 1 90 to D1 No 2 90 to A12 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 3 90 to D1	A4.	Last week, did you have a job to start at a definite date in the future?		in finding a job 04 🔾
A5. Will you usually work 30 or more hours per week? Yes 30 go to C1 No 40 go to A6 Don't know 50 go to C1 A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) Full-time work is under 30 hours a week 10 Did not want full-time work 20 Own illness or disability 30 Personal or family responsibilities 40 Going to school 50 Could only find part-time work 60 Other reason (Specify) 70 A11. Since January 1988, did you ever have a full-time job which lasted six months or more? Yes 10 go to D1 No 20 go to A12 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 30 go to D1		Yes 1 O go to A5		
A5. Will you usually work 30 or more hours per week? Yes				
AS. Will you usually work 30 or more hours per week? Yes		No	100	
kind of job wanted 08 No	A5.	Will you usually work 30 or more hours per week?		from employer
Don't know		Yes 3 O go to C1		
A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) Full-time work is under 30 hours a week 1 0 Did not want full-time work 2 0 Own illness or disability 3 0 Personal or family responsibilities 4 0 Going to school 5 0 Could only find part-time work 6 0 Other reason (Specify) 7 0 A11. Since January 1988, did you ever have a full-time job which lasted six months or more? Yes 1 0 go to D1 No 2 0 go to A12 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 3 0 go to D1		No 4 O go to A6		Discouraged with looking 09 〇
A6. What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.) Full-time work is under 30 hours a week		Don't know 5 O go to C1		
Full-time work is under 30 hours a week	A6.	What is the reason you will usually work less than 30 hours per week? (Do not read list: check one		No reason given
Did not want full-time work		only.)		Other reason (Specify)
Own illness or disability 3 Personal or family responsibilities 4 Going to school 5 Could only find part-time work 6 Other reason (Specify) 7 A12. Since January 1988, did you ever have a full-time job which lasted six months or more? A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 3 go to C1 A13. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more?				
Personal or family responsibilities 40 A11. Since January 1988, did you ever have a full-time job which lasted six months or more? Yes 10 go to D1 No 20 go to A12 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 30 go to D1		Did not want full-time work 2 〇		
family responsibilities 4 O Going to school 5 O Could only find part-time work 6 O Other reason (Specify) 7 O A11. Since January 1988, did you ever have a full-time job which lasted six months or more? Yes 1 O go to D1 No 2 O go to A12 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 3 O go to D1		Own illness or disability ³ O		Liverconnection
Going to school Could only find part-time work Other reason (Specify) 7 A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes 3 go to D1				
Could only find part-time work		Going to school 5 0	A11.	
Other reason (Specify) A12. Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more? Yes		Could only find		Yes 1 O go to D1
Other reason (Specify)				No 2 0 go to A12
which you usually worked 30 or more hours per week and which lasted six months or more? Yes		Other reason (Specify) 7 0		
			A12.	which you usually worked 30 or more hours per
No				Yes
				No 4 O go to E1

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8-5141-255

- 4 -

B15.	In this work, what were your most important activities or duties? (Give full description, e.g., teaching geography, managing a research lab., selling shoes.)	 When you were selected for that j education was needed to get to read list: check one only.) 	
		Don't know	01 ()
		No qualifications specified	02 🔾
		High School:	go to B22
		Some high school	03 🔾
		High school diploma certificate	04 🔾
		General Postsecondary:	
		Some postsecondary education (level not specified)	05 🔘
B16.	When did you start working at this new job?	Trade or Vocational:	
		Some trade-vocational	06 🔾
	1 1988 20		
	Month 1989 3 (Trade or vocational	07.0
		certificate diploma	07 🔘
	1990 -	Callago	
	1991 5 🔾	College:	
		Some college, CEGEP or similar institution.	
	(INTERVIEWER: Item 816 date must not be before	incl. nursing school	08 🔘
	May 1988.)	Diploma or certificate	
B17.	Was the educational program you completed in	from college, CEGEP or similar institution.	
	1986 intended to prepare you for this job?	incl. nursing school ,	09 🔘
		University:	
	Yes 6 O	Some university	
		(incl. university transfer	10 (
	No 7 O	in Alta. and B.C.)	
		University diploma or certificate below	
	Don't know 8 O	bachelor's level	11 ()
187		Degree,	
		level not specified	150
B18.	Last week, were you a paid worker or self- employed?	Bachelor's degree (e.g., B. A., B. Sc., 4-year B.Ed.)	13 🔘
		University diploma	
	Paid worker	or certificate. level not specified	14 🔾
	20 20	University diploma or certificate above	
	Self-employed 2 go to B23	bachelor's level but	15 🔾
		below master's level	130
	Other (e.g., unpaid family worker) 3 go to B19	Master's degree (e.g., M.A., M.Sc., M.Ed.)	16 🔾
		Degree in medicine, dentistry.	
		veterinary medicine, law, optometry or theology	
B19.	Is this a permanent position or a temporary position?	(M.D., D.D.S. D.M.D., D.V.M., LL.B., O.D., M.DIV.)	
	position:	or 1-year B. Ed. after	
		another Bachelor's degree	17 🔾
	(Definition: There was no indication that the job would	Earned Doctorate (e.g. Ph.D., D.Sc., D.Ed.)	18 🔘
	end at some definite point in time. e.g., hired permanently with no specified term.)	Other (Specify)	19 🔘
		State (opecany)	
	Temporary		
	would terminate at some specified point in time. e.g., hired for a six-month term.)		

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B21a. Did the employer specify that it must be in a specific field or fields of study?	 What level of education is required now? (Do not read list; check one of the control of the contro	
Yes ¹ ○ → B21b. What field(s) of study?	Don't know	01 (
(If two of equal importance, enter both.)	No qualifications specified	02 🔾
	High School:	
151	Some high school	03 🔾
	High school diploma certificate	04 🔾
	General Postsecondary:	
2nd	Some postsecondary education (level not specified)	05 🔿
	Trade or Vocational:	
No 2O	Some trade-vocational	06 🔾
22. Did the employer specify that related work experience was essential for that job?	Trade or vocational certificate diploma	07 🔿
Yes 3 O	College:	
No 4 O	Some college. CEGEP or similar institution. incl. nursing school	08 🔘
Don't know	Diploma or certificate from coilege. CEGEP or similar institution.	
	incl. nursing school	09 🔾
23. Has the level of education required to get this job changed since you started it?		
	University:	
Yes	Some university (incl. university transfer in Alta. and B.C.)	10 🔘
Don't know	University diploma or certificate below bachelor's level	11 🔾
	Degree, level not specified	12 🔾
	Bachelor's degree (e.g., B. A., B. Sc., 4-year B.Ed.)	13 🔾
	University diploma or certificate. level not specified	14 🔘
	University diploma or certificate above bachelor's level but below master's level	15 🔾
	Master's degree (e.g., M.A., M.Sc., M.Ed.)	16 🔾
	Degree in medicine, dentistry, veterinary medicine, law, optometry or theology (M.D., D.D.S., D.M.D., D.V.M., LL.B., O.D., M.DIV.) or 1-year B. Ed. after another Sachelor's degree	170
	Earned Doctorate (e.g. Ph.D., D.Sc., D.Ed.)	18 🔾
	Other (Specify)	19 🔾

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B25.	In this job, did you use any of the skills acquired from the educational program you completed in 1986?	B31.	Last week, did you have a job to start at a definite date in the future?
	Yes 1 O No 2 O		Yes 1 go to B32
B26.	Considering all aspects of the job you had last week, how satisfied were you with the job?		No 2 O go to B34
	Would you say that you were (Read first four categories.)	B 32.	Will you usually work 30 or more hours per week at that job?
	very satisfied? ³ O		Yes 3 O go to B35
	satisfied? 4 ○		No 4 O go to B33
	dissatisfied? 5 O		Don't know
	very dissatisfied? 6 O		
	Don't know, no opinion 7 🔾	B33.	What is the reason you will usually work less than 30 hours per week? (Do not read list: check one only.)
827.	Considering the duties and responsibilities of that job, how satisfied were you with the money you made? Would you say that you were (Read first four categories.)		Full-time work is less than 30 hours a week
	very satisfied?		Did not want full-time work 2 🔾
	satisfied? ² O		Own illness or disability 3 O
	dissatisfied? 3 O		Personal or family responsibilities 4 O
	very dissatisfied? 4 🔘		Going to school 5 O
	Don't know, no opinion 5 🔾		Could only find part-time work
B28.	Working your usual hours, approximately what would be your gross annual earnings at that job? (Record to the nearest thousand dollars.)		Other reason (Specify) 7
	,000		
	Don't know 997 🔾		
	Refused 998 🔾		
B29.	How many hours a week did you usually work at that job? (If respondent says "it varies", ask for an average of the last four weeks.)	B34.	Last week, were you looking for a full-time job or a job at which you would usually work 30 or more hours per week?
	Number of hours		Yes 8 O No 9 O
	(INTERVIEWER: If the number of hours is 30 or more, go to F1.)	B35.	In the job you held last week, did you ever work full-time for a period of six months or more since
B30.	What is the reason you usually worked less than 30 hours per week? (Do not read list: check one only.)		January 1988? By this we mean doing the same kind of work for the same employer.
	Full-time work is less than 30 hours a week 1 O go to F1		Yes 1 O go to F1
	Did not want full-time work 2 O go to B35		No 2 O go to B36
	Own illness or disability 3 O Personal or	B36.	Since January 1988, did you ever work at that job for 30 hours or more per week for a period of six months or more?
	family responsibilities 4 O		Yes 3 Q go to F1
	Going to school		
	part-time work 6 O		No
	Other reason (Specify)	B37.	Since January 1988, did you ever have a full-time job which fasted six months or more?
			Yes
			No 6 O go to 838

B38.	Since January 1988, did you ever have a job at which you usually worked 30 or more hours per		TION C: DESCRIPTION OF MAIN JOB
	week and which lasted six months or more? Yes	C1.	INTERVIEWER: For questions C1 through C32, if the respondent had (or will have) more than one job, ask about the main job, i.e., the one usually worked at for the most number of hours.
	No 8 O go to F1		For whom did (will) you work? (Name of business. government department or agency, or person.)
B39.	INTERVIEWER: For questions B39 through B44, if the respondent had more than one such job, ask about the most recent job.		Same employer as in INFO Item 1 6 O
	For whom did you work? (Name of business, government department or agency, or person.)	3	
B40.	What kind of business, industry or service is this? (Give full description, e.g. elementary school,		
	municipal government, retail shoe store.)	C2.	What kind of business, industry or service is this? (Give full description, e.g. elementary school, municipal government, retail shoe store.)
841.	What kind of work did you do? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson.)		
		C3.	What kind of work did (will) you do? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe
			salesperson.)
B42.	In this work, what were your most important activities or duties? (Give full description. e.g., teaching geography, managing a research lab., selling shoes.)		
			1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
B43.	When did you begin that job?		
	Month Year	C4.	In this work, what were (will be) your most important activities or duties? (Give full description. e.g., teaching geography, managing a research lab., selling shoes.)
	(INTERVIEWER: Item B43 date must be before December 1990.)		
B44.	When did you end that job?		
	1 1988 2 0		
	Month 1989 3 🔿		
	1990 4		
	1991 5 🔾		
	(INTERVIEWER: Now go to F1.)		

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C5.	Working your usual hours, approximately what would be your gross annual earnings at that job? (Record to the nearest thousand dollars.)	C9. When you were selected for that job, what education was needed to get the job? read list; check one only.)	
		Don't know	
		No qualifications specified 62	
	\$000	High School:	go to C11
		Some high school 03 O	
	Don't know 997 🔘	High school diploma certificate	
		General Postsecondary:	
	Refused 998 🔿	Some postsecondary education (level not specified)	
		Trade or Vocational:	
		Some trade-vocational 06 O	
		333 3333 3333 3333 3333	
C6.	Was the educational program you completed in 1986 intended to prepare you for this job?	Trade or vocational certificate diploma	
		College:	
	Yes 1 🔾	Some college. CEGEP or similar institution, incl. nursing school	
	No 2 🔿	Diploma or certificate from college. CEGEP or similar institution.	
	Don't know	incl. nursing school 09 🔾	
		University:	
		Some university (incl. university transfer in Alta. and B.C.)	
C7.	Were you (will you be) a paid worker or self- employed?	University diploma or certificate below bachelor's level	
		Degree, level not specified	
	Paid worker 4 go to C8	Bachelor's degree	
		(e.g., B. A., B. Sc., 4-year B.Ed.)	
	Self-employed 5 go to C12	University diploma or certificate.	
	Other	level not specified 14 🔾	
	(e.g., unpaid family worker) ⁶ ○ go to C8	University diploma or certificate above bachelor's level but	
		Master's degree (e.g., M.A., M.Sc., M.Ed.) 16	
C8.	Is this a permanent position or a temporary position?	Degree in medicine, dentistry, veterinary medicine, law, optometry or theology	
	(Definition: There was no indication that the job would end at some definite point in time. e.g., hired	(M.D., D.D.S. D.M.D., D.V.M., LL.B., O.D., M.DIV.) or 1-year B. Ed. after another Bachelor's degree 17 🔾	
	permanently with no specified term.)	Earned Doctorate (e.g. Ph.D., D.Sc., D.Ed.) 18 🔾	
	Temporary 8 O	Other (Specify)	
	(Definition: There was a definite indication that the job would terminate at some specified point in time. e.g., hired for a six-month term.)		

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C10a. Did the employer specify that it must be in a C16. What level of education is required for this job specific field or fields of study? Yes ¹ ○ → C10b. What field(s) of study? (If two of equal importance, enter both.) No qualifications specified High School: Some high school 03 (High school diploma certificate 04 () General Postsecondary: Some postsecondary education (level not specified) 05 (Trade or Vocational: Some trade-vocational 06 (No 20 Trade or vocational 07 (C11. Did the employer specify that related work experience was essential for that job? certificate diploma College: Yes 3 🔾 Some college. CEGEP or similar institution. incl. nursing school 08 🔘 40 No Diploma or certificate from college, CEGEP or similar institution. Don't know 5 🔘 incl. nursing school 09 🔘 University: C12. INTERVIEWER CHECK-ITEM: Some university (incl. university transfer in Alta, and B.C.) # "Yes" in Item A4 6 0 go to C13 10 (University diploma or certificate below Otherwise 7 O go to C15 bachelor's level 11 (Degree. level not specified 120 Since January 1988, did you ever have a full-time job which lasted six months or more? Bachelor's degree (e.g., B. A., B. Sc., 4-year B.Ed.) 13 () 8 O go to D1 University diploma or certificate, level not specified 14 (No 9 O go to C14 University diploma or certificate above bachelor's level but C14. Since January 1988, did you ever have a job at 15 (below master's level which you usually worked 30 hours or more per Master's degree (e.g., M.A., M.Sc., M.Ed.) week and which lasted six months or more? 16 (Degree in medicine, dentistry, veterinary medicine, law, Yes 1 O go to Df optometry or theology (M.D., D.D.S, D.M.D., D.V.M., LL.B., O.D., M.DIV.) or 1-year B, Ed, after No 2 O go to E1 another Bachelor's degree 170 Earned Doctorate (e.g. Ph.D., D.Sc., D.Ed.) Has the level of education required to get this job changed since you started it? :8 🔾 19 (Other (Specify) Yes 3 O go to C16

go to C17

5 (

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No

C17.	In this job, did you use any of the skills acquired from the educational program you completed in 1986?	C24.	What is the reason you will usually work less than 30 hours per week? (Do not read list; check one only.)
	Yes 1 O No 2 O		Full-time work is less than 30 hours a week
C18.	Considering all aspects of the job you had last week, how satisfied were you with the job? Would you say that you were (Read first four categories.)		Did not want full-time work
	very satisfied? 3 O		Own illness or disability 3 O
	satisfied? 4 O		family responsibilities 4 O
	dissatisfied? 5 O		Going to school 5 O
			Could only find part-time work 6 (
	very dissatisfied? 6 🔾		part-time work
	Don't know, no opinion	1.5	Other reason (Specify) 7 0
C19.	Considering the duties and responsibilities of that job, how satisfied were you with the money you made? Would you say that you were (Read first four categories.)		
	very satisfied? 1 O		
	satisfied? 2 O		
	dissatisfied? 3 O	C25.	Last week, were you looking for a full-time job or
	very dissatisfied? 4 O		a job at which you would usually work 30 or more hours per week?
	Don't know, no opinion 5 🔘		Yes 8 O No 9 O
C20.	How many hours a week did you usually work at that job? (If respondent says "it varies", ask for an	C26.	When did you begin the job you held last week?
- 117	average of the last four weeks.)		119
	Number of hours		Month Year
		C27.	INTERVIEWER CHECK-ITEM:
	(INTERVIEWER: If the number of hours is 30 or more, go to C26.)		If the date in Item C26 is after November 1990 (11/90) 1 O go to C30
C21.	30 hours per week? (Do not read list; check one		Otherwise 2 O go to C28
	only.) Full-time work is less than 30 hours a week	C28.	Since January 1988, did you ever work at that job full-time for a period of six months or more? By this we mean doing the same kind of work for the same employer.
	full-time work		Yes 3 O go to C32
	Own illness or disability 3 O		No
	Personal or family responsibilities 4 (C20	Since January 1988, did you ever work at that job
	Going to school 5 O	025.	for 30 hours or more per week for a period of six months or more?
	Could only find part-time work 6		Yes 5 O go to C32
			No 6 O go to C30
	Other reason (Specify)		
		C30.	Since January 1988, did you ever have a full-time job which lasted six months or more?
			Yes 7 O go to D1
			No 8 O go to C31
C22.	date in the future?	C31.	Since January 1988, did you ever have a job at which you usually worked 30 or more hours per week and which lasted six months or more?
	Yes 8 O go to C23		Yes 1 O go to D1
	No 9 O go to C25		No
C23.	Will you usually work 30 or more hours per week?	0.75	W250145W50 01450 2704
	Yes 1 O go to C26	C32.	INTERVIEWER CHECK-ITEM:
	No 2 O go to C24	THE	If the year in Item C26 is 1990 or 1991
	Don't know	140	Otherwise 4 O go to F1

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	SECTION D:		INTERVIEWER CHECK-ITEM:	
MO	ST RECENT JOB LASTING SIX MONTHS OR MORE			
D1.	INTERVIEWER: For questions in section D. if the respondent had more than one such job, ask about the most recent job.		If "No" in item A2 1 ○ go to D6	
	For whom did you work? (Name of business, government department or agency, or person.)		Otherwise 2 go to D16	
	Same employer as in C1 5 〇			
	or	D6.	Working your usual hours, approximately what would have been your gross annual earnings at that job? (Record to the nearest thousand dollars.)	
			\$ 000,000	
			Don't know	
D2.	What kind of business, industry or service was this? (Give full description, e.g. elementary school municipal government, retail shoe store.)		Refused	
	Same business, industry or service as in C2			
	or	D7.	Was the educational program you completed in 1986 intended to prepare you for this job?	
			Yes 1 O	
8.			No 2 🔿	
			Don't know	
D3.	What kind of work did you do? (Give full description, e.g., elementary school teacher, manager of a biological research department, shoe salesperson.)			
	Same kind of work as in C3 7 〇	D8.	Were you a paid worker or self-employed?	
	Of		Paid worker	
			Self-employed 5) go to D13	
			Other (e.g., unpaid family worker) 5 O go to D9	
	لسسسسا		(e.g., arpaid farmly worker)	
D4.	In this work, what were your most important activities or duties? (Give full description. e.g teaching geography, managing a research lab., selling shoes.)	D9.	Was this a permanent position or a temporary position?	
	Same activities or duties as in C4 8 O		Permanent	
			Temporary	

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D10.	When you were selected for that judducation was needed to get the read list; check one only.)			i. Did the employer specify that it must be in a specific field or fields of study?
	Don't know	010)		Yes ¹ ○ → D11b. What field(s) of study? (If two of equal importance.
	No continuous associant	02 ()		enter both.j
	No qualifications specified	go to		1st
	High School:	D12		
	Some high school	03 🔾		
	High school diploma certificate	040		2nd [
	General Postsecondary:			
	Some postsecondary education (level not specified)	05 🔘		No ² O
	To do a Marking land		D12.	Did the employer specify that related work experience was essential for that job?
	Trade or Vocational:	06 🔾		Yes 3 O
	Some trade-vocational	000		No 4 O
	Trade or vocational			
	certificate diploma	07 🔾		Don't know 5 O
	College:		D13.	In this job, did you use any of the skills acquired from the educational program you completed in 1986?
	Some college. CEGEP or similar institution.			Yes 6 O No 7 O
	incl. nursing school	08 🔘	D14	Considering all aspects of the job, how satisfied
	Diploma or certificate from college, CEGEP or similar institution,		D14.	were you with that job? Would you say that you were (Read first four categories.)
	incl. nursing school	09 🔾		very satisfied? 1 O
				satisfied? 20
	University:			dissatisfied? 3 O
	Some university (incl. university transfer			very dissatisfied? 4 O
	in Alta. and B.C.)	10 🔘		Don't know, no opinion 5 O
	University diploma or certificate below		-	
	bachelor's level	110	D15.	Considering the duties and responsibilities of that job, how satisfied were you with the money you made? Would you say that you were (Read first
	level not specified	12 🔾		four categories.) very satisfied? 1 ○
	Bachelor's degree (e.g., B. A., B. Sc.,			satisfied?2 O
	4-year B.Ed.)	13 🔾		
	University diploma or certificate.			dissatisfied? 3 O
	level not specified	14 🔾		very dissatisfied? 4 O
	University diploma or certificate above			Don't know, no opinion 5 O
	bachelor's level but	15 🔾	D16.	When did you begin that job?
	below master's level	130		19
	Master's degree (e.g., M.A., M.Sc., M.Ed.)	16 🔾		Month Year
	Degree in medicine, dentistry, veterinary medicine, law,		1	(INTERVIEWER: Item D16 date <u>must</u> be before December 1990.)
1	optometry or theology (M.D., D.D.S. D.M.D.,		D17.	When did you end that job?
	D.V.M., LL.B., O.D., M.DIV.)			1 1988 20
1	or 1-year B. Ed. after another Bachelor's degree	17 🔾		Month 1989 3 🔾
	Earned Doctorate			1990 4〇
	(e.g. Ph.D., D.Sc., D.Ed.)	18 🔘		1991 5 🔾
	Other (Specify)	19 🔾	D19	INTERVIEWER CHECK ITEM:
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	010.	If the year in Item D16 is 1990 6 go to E1
				Otherwise
			D10	INTERVIEWER CHECK ITEM:
			019.	If the year in Item D17 is 1991 8 Q go to F1
				Otherwise
				One mide

SEC	TION E: ACTIVITIES IN 1990	E6.	During this (Read answer in E3.) month-
E1.	Now some questions about the whole of 1990. During that year, were you ever without a job or business (read reasons)		period, how long in total were you looking for a job?
	a. because you were going to school?		Number of months
	b. because you had personal or family responsibilities? 3		(INTERVIEWER: Item E6 must <u>not</u> be more than Item E3.)
	c. because you couldn't find work? 5 6	E7.	At any time during this (Read answer in E6.) month-period you were looking for a job, were you a full-time student?
	d. for any other reason? (Specify)		Yes 1 \(\) go to E8
			No 2 () go to E9
		E8.	How much of this (Read answer in E6.) month-period were you a full-time student?
			Number of months
E2.	INTERVIEWER CHECK ITEM:		(INTERVIEWER: Item E8 must <u>not</u> be more than Item E6.)
	If any "Yes" checked in Item E1 1 O go to E3	E9.	During the period when you were NOT looking for a job, were you ever waiting to start a new job or return to an old job?
	Otherwise 2 🔾 go to F1		Yes 3 ○ go to E10 No 4 ○ go to F1
E3.	Considering all these reasons, how long in total were you without a job in 1990?	E10.	How long were you waiting? That is, how long were you waiting to start a new job or return to an old job during the period you were not looking for a job?
	Number of months		Number of months
			Number of months
E4.	Was there any time during this (Read answer in E3.) month-period when you were NOT looking for a job?		(INTERVIEWER: Now go to F1.)
	Yes 3 () go to E5	E11.	At any time during this (Read answer in E3.) month-period you were without a job, were you ever a full-time student?
	No		Yes 5 🔾 go to E12
E5.	At any time during this (Read answer in E3.) month-period, was there any time you WERE looking for a job?		No 6 🔾 go to F1
	Yes 5 Q go to E6	E12.	How much of this (Read answer in Item E3.) month-period were you a full-time student?
			Number of months
	No 6 🔾 go to E9		(INTERVIEWER: Item E12 must not be more than Item E3.)

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SEC	TION F: EDUCATION TAKEN SINCE MAY 1988	F4.	INTERVIEWER CHECK ITEM:
F1.	INTERVIEWER CHECK ITEM:		
	Il INFO Item 3 is blank 1 go to F15		If INFO Item 4 is blank
	Otherwise 2 go to F2		Otherwise 6 go to F5
F2.	The information from the May 1988 survey indicates that you were attending an education program leading to a (Read INFO Item 3.). Is this correct?	ey nai F5.	Was the major field of study or specialization
	Yes 3		(Read INFO Item 4.)? Yes ⁷ ○ go to F7
	No		
Ca	18/hot has a day on distance and distance		No 8 🔾 go to F6
F3.	What type of degree, diploma, certificate licence was it? (Do not read list; check one only).	or	
	None	F6.	What was the major field of study or specialization?
	Community College. CEGEP, Technical Institute, Nursing School:		1st
	b. Certificate or diploma 03 ()		
	University: c. Certificate or diploma below bachelor level 04 ()		4.0
	d. Bachelor's degree (e.g. B.A., B.Sc., B.A.Sc., 4-year B.Ed.)		2nd
	e. Certificate or diploma above bachelor level but below master's level 06 ()		
	f. Master's degree (e.g., M.A.M.Sc., M.Ed) 07 ()		
	g. Degree in medicine. dentistry. veterinary medicine. law, optometry or theology (M.D., D.D.S, D.M.D., D.V.M.,	F7.	In what month and year did you, or do you expect to, complete the requirements?
	LL.B., O.D., M.DIV.), or 1-year B. Ed. after a Bachelor's degree		
	h. Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.) 09 ()		Month Year
	Professional Association:		Don't know
	Diploma, certificate or licence such as in accounting, banking or insurance		Dropped out 3 🔘
	j. Other (Specify)		

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F8.	INTERVIEWER CHECK ITEM:	F11.	INTERVIEWER CHECK ITEM
	If INFO Item 5 is blank 4 O go to F15		
	go to 170		If INFO Item 6 is blank 1 go to F13
	Otherwise 5 go to F9		Otherwise
F9.	The information from the May 1988 survey all indicates that you were attending an education program leading to a (Read INFO) item 5.).	so	
	is this correct?	F12.	Was the major field of study or specialization (Read INFO Item 6.)?
	Yes 6 O go to F11		
73.1			Yes 3 () go to F14
	No 7 O go to F10		
			No
F10.	What type of degree, diploma, certificate licence was it? (Do not read list; check one only).	or	
	None 01 O go to F15	540	
	or	F13.	What was the major field of study or specialization?
	Trade or vocational:		
	a. Certificate or diploma 02 🔘		
	Community College, CEGEP, Technical Institute, Nursing School:		
	b. Certificate or diploma 03 🔘		
	University:		
	c. Certificate or diploma below bachelor level 04 🔾		270
	d. Bachelor's degree (e.g. B.A B.Sc.,B.A.Sc. 4-year B.Ed.) 05 O		
	e. Certificate or diploma above bachelor level but below master's level		
	f. Master's degree (e.g., M.A.,M.Sc.,M.Ed) 07 〇		
	g. Degree in medicine.	F14.	In what month and year did you, or do you expect
	dentistry, veterinary medicine, law.		to, complete the requirements?
	optometry or theology (M.D., D.D.S, D.M.D., D.V.M.,		
	LL.B., O.D., M.DIV.), or 1-year B. Ed. after a Bachelor's degree 08 🔘		Month Year
	h. Earned doctorate		
	(e.g., Ph.D., D.Sc., D.Ed.) 09 O		Don't know 6 🔘
	Professional Association:		Dropped out
	Diploma. certificate or licence such as in accounting, banking		Dropped out
	or insurance 10 🔾		
	J. Other (Specify)	F15.	Since May 1988 have you taken any (other) education or training programs leading to any degrees, diplomas, certificates or licences?
			Yes
			No 9 00 to F18

8 KUII 5 168

	What types of degrees, diplocertificates or licences were (Do not read list; check all that applications)	these?	of study or specialization?	what month ear did you, or ou expect to, omplete the quirements?
	Trade or vocational:			
	a. Certificate or diploma	01 🔾 🔷		onth Year
				know
	Community College, CEGEP. Technical Institute, Nursing School:		Dropp	ed out
	b. Certificate or diploma	02 🔿 🖚	4	onth Year
			Don't	
	University:		Dropp	ed out
	c. Certificate or diploma below bachelor level	03 🔾 🔷	7	onth Year
			Don't	
				ed out
	d. Bachelor's degree (e.g. B.A., B.Sc.,			
	(e.g. B.A., B.Sc., B.A.Sc, 4-year B.Ed.)	04 🔾 🗢	, ————————————————————————————————————	onth Year
			Don't	know 2
	a lalinarian		Dropp	ed out 3
	e. Certificate or diploma above bachelor level but below master's level	05 🔾 🔷	4	onth Year
			Don't	
			Dropp	ed out 6
1	f. Master's degree (e.g., M.A.,M.Sc.,M.Ed)	06 🔾 🖚	7	onth Year
	g. Degree in medicine, dentistry, veterinary		Don't	
	medicine. law. optometry or theology (M.D., D.D.S, D.M.D., D.V.M., LL.B., O.D.,		Dropp	ed out 9
	M.DIV.), or 1-year B. Ed. after a Bachelor's degree	07 🔾 🖜	<u> </u>	onth Year
			Don't	
			Dropp	ed out 3
	h. Earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)	08 🔾 🔷	4	onth Year
	Professional Association:			know 5
	Diploma, certificate		Dropp	ed out 6
	or licence such as in accounting, banking	09 🔾 🖈		
			Don't	onth Year
				ed out 9
	. Other (Specify)	10 🔾 🛧	<u> </u>	
			Mo	onth Year know 2
				ed out ²
			Dropp	20 001

F17.	Did you take any student?	y of these programs as a full-tim	e F22.	What level of degree or diploma would you have taken? (Do not read list: mark one only.)
	Yes ¹ O	No 2 O		University diploma or certificate below bachelor level
F18.	educational pro-	eriences since completing th gram in 1986, would you hav ame educational program.	e	Bachelor's degree. general or honours (e.g., B.A.B.Sc. 4-year B.Ed.)
	postsecondary p		y	University diploma or certificate above bachelor's level but below master's level . 3 (
	Same	3 O go to F23		Master's degree (e.g.,M.A., M.Sc., M.Ed.) 4 O
	Different	4 O go to F19		Degree in medicine, dentistry, veterinary medicine, law,
	None	5 O go to F23		optometry or theology (M.D., D.D.S., D.M.D., D.V.M., LL.B., O.D., M.DIV.), or 1-year B. Ed. after another
	Don't know	6 O go to F23		Bachelor's degree 5 O
F19.	Would you have or specialization?	chosen the same field of stud	7	Doctorate (e.g., Ph.D., D.Sc., D.Ed.) 6 (
	Yes			Don't know
	No	8 O go to F20		Other (Specify) 8 O
	140			
	Don't know	9 O go to F21		
F20.	What field of ste have chosen? (first.)	udy or specialization would you If two, record the more importan	1	
	151		F23.	In general, how important is it that any job you get be related to your field of study or specialization? Would you say it is (Read first four categories.)
				very important? 1 🔾
				important? 2 O
	2nd			not important? 3 🔾
				not at all important? 4 O
				Don't know, no opinion 5 🔾
	Don't know		SEC	TION G: GENERAL QUESTIONS
F21.		rogram would you have taken e, or trade-vocational?	G1.	Now some general questions. What is your marital status? Are you (Read the categories.)
	University	2 O go to F22		now married or living common-law? 6 ○
	College	30]		single, that is, never married?
	Trade or vocationa			a widow or widower? 8 🔘
	Don't know	50 go to F23		separated or divorced? 9 🔾
	Other (Specify) .	60)	G2a.	Do you have any dependent children?
				Yes ¹○ → G2b. Please tell me their ages. (Record age in years as of last birthday.)
				a b c d e
				No 20

8-5100-2551

G3.	What was your total personal incomsources before taxes and deductions to months? Was it		G7. From which of the following groups of parents or grandparents descend? (Read list; mark all responses reported)	did your
	. 11	ess than 15.000? 11 O	(nead its), mark all responses reported) Yes	No
Less	\$20,000? 35 0	5.000 more? 12		020
\$30,00	\$20,000 or more? 06	ess than 25.000? 13 O	b) Japanese 03 🔾	04 ()
	La Si	25,000 more? 14 O	c) Korean	06 🔾
	Less than \$40,000? 07	ess than 15,000? 15 〇	d) Filipino 07 🔾	080
	La Si	15,000 more? 16	e) East Indian (from India, Pakistan, Bangladesh, East Africa, Guyana, etc.) 09	100
	\$40,000 or more? 08	ess than 15,000? 17 O	f) Black ifrom Africa, the Caribbean. Hais, the U.S.A. Canada, etc. 1	120
\$30,00 or mo	0 re? 02	more? 18 O	g) North American Indian 13 🔾	140
	Less than \$560,000? 09 \$5	is,000? 19 O	h) Metis 15 🔾	16()
	\$50,000 or more?04	more? 20 O	1) Inuit Esizmo)	18 🔾
	\$60,000 or more? 10	5.000? 21 O	j) Arab from Egypt, Jordan. Lenanon frag, etc.	20 🔾
	No income 23 🔾	more / ** O		220
	Don't know 24 🔘		(from Burma, Cambodia Kampuchea, Laos, Thailand, Vietnam, etc.) 23 (24 🔾
	Refused 25 🔘		m) North African (from Egypt.	26 🔾
G4.	Are you limited in the kind or amount you can do because of a long-term condition, mental condition or health;	physical	n) Latin American (from Mexico. Central America. South America) 27	28 🔾
	(Read list.) Yes a. at home?	No 2 O	o) British (from England. Scodland, Ireland, etc.)	30 🔾
	b. at school or work? 3 〇	40	p) French 31 🔾 =	320
	c. in other activities, such as transportation or leisure-time activities? 5 ○	6 🔿	q) Any other European groups . 33 🔾	34 🔾
G5.	INTERVIEWER CHECK-ITEM:		r) Canadian	36 🔾
		to G6a	s) Any others	38 🔘
G6a.	Are you handicapped or disabled with			
	(Read list.) G6b. How m	any years ou been		
	handio disable way?	apped or ed in this	Ba. During 1990, did you take part in any Emp and Immigration Canada training or assistance programs?	oloyment financial
74	a. Mobility, agility? 01 0 02 0 → 1	er of years	Yes 1 O No 2 O go to	H1
	b.Sight, seeing? 03○ 04○ → 2		G8b. Which of the Employment and Imr Canada programs did you take part in	migration n?
	c. Hearing? 05 ○ 06 ○ → 3			الب
	d.Speech, speaking? . 07 ○ 08 ○ → 4			
	e. Learning? . 09 ○ 10 ○ → 5		Any others?	
	f. Emotions, mental problems? 11 ○ 12 ○ → 6			
	g. Anything else? 13 O 14 O → 7			
	(Se	pecify)	Any others?	

3-5107-25

SECTION H: ADMINISTRATIVE QUESTIONS	H2. Would you please give me the name, address and
HI. We may wish to contact you again for a follow- up to this survey (read address and telephone number from the INFORMATION SHEET.) and make any corrections below.	telephone number of someone we could contact if you move, such as a friend, relative or neighbour? We will contact this person only if you have moved in order to obtain your new address or telephone number.
	Address and telephone number same as in H1 6 (
	Name []]]]]]
Name	Surname
No change 1 O	Given name
or	
Surname	Address Street (name and number)
Given name	Apartment number, P.O. Box
	City, Town, Village
Address	Province
No change 2 O	Flowing
Or	Code postal
Street (name and number)	Home telephone
	or
Apartment number, P.O. Box	Business telephone
City. Town, Village	Refused 7 〇
	H3. INTERVIEWER: READ THE FOLLOWING STATEMENT
Province	H3. INTERVIEWER: READ THE FOLLOWING STATEMENT CONCERNING JOINT COLLECTION AND DATA-SHARING EXACTLY AS WORDED.
Postal code No change 3 O or	To avoid duplication of enquiry, Statistics Canada is again conducting this survey jointly with Employment and Immigration Canada, the Department of the Secretary of State and the provincial Ministries of Education and Labour. The information provided to these departments will not contain names or other identifying data and will be kept confidential and used only for statistical purposes.
	Do you garee to share your answers?
Home telephone	Do you agree to share your answers?
No change 4 🔾	Yes ® O No 9 O
or	H4. END OF INTERVIEW:
	Thank you for your participation in this survey.
	INTERVIEWER: Please check question H5 and ensure that questions H1 and H2 are completed correctly. Enter the final status of the interview on the front page.
Work telephone	H5. Province or territory where respondent was located
No change 5 🔾	when interviewed:
or	Nfld. 01 Quebec 05 Alberta 09 Q
	P.E.I. 02 O Ontario 06 O B.C. 10 O
	N.S. 03
	N.B. 04 O Sask. 08 O N.W.T. 12 O
	H6. Language of interview:
	English '& French 2 O
	Cirginal & FIGURE C

8-5113-255

Date	Start	Finish	Comments - Results	Telephone Number	int. Initials
1					
2					
3					
4				01 11 11 11 11 11 11 11	
5					
6					
7					
8					
0					
1					
2					
3					
4				84.5	
5					
6					
7					
8					
9					
OMMEN					

1990 Housing Repair and Renovation Survey



Survey Month: March 1991

1990 Housing Repair and Renovation Survey Title:

Sponsor: Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: Rotation group 5 (6,000 homeowners)

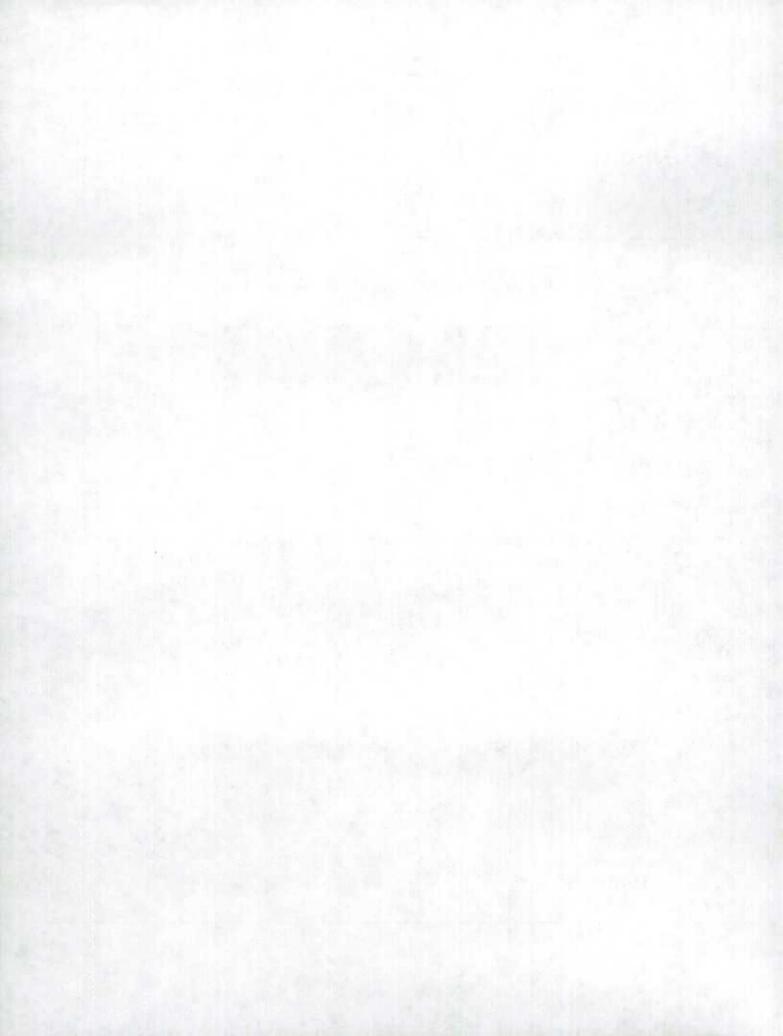
Objectives: The objective of the survey is to provide annual information on home

improvement and maintenance expenditures of Canadian homeowners.

Project Manager: Robin Chaplin (951-4642)

Microdata: Price Yes No

X



1 FORM NO. 08

Confidential (when completed)

Collected under the authority of the Statistics Act, Revised Statutes of Capacia, 1985 Chapter \$19

9.	COMPLET LFS non-in Interview e Did not ow	TION STATE	10	Docket N 2 Dwelling 5 Language 7 Partially of	Type e of Assignment] [Jisting Address Telephone Nu Telephone Nu Telephone Nu Telephone Nu	Assignment No.
	Completed		30	Other no (Specify	in notes)			
	repairs, m	aintenanc	e and renovations.	er to obtain informati				
No. of the last	If the person	ns etc.?	Last nam	e			RD page line no. (
#	Date	Time		Comments		Call bar	al. fac.	
-	Date	Title		Comments		Call Dai	CR TOF.	
1								
2								
3						-		
4								
	Mor	nths		ed and occupied by a cupy any other dwelling	746			
	Yes 10	-	How many other	For how many			Was this	
	No 20		dwellings?	months in 1990?	a sis tan dwel		an apartment?	another type of dwelling?
				1:	1 ()	20	30
				2:	40		50	60
		+		3:	-()	80	90
15.	INTERVIEW	ER CHEC	K ITEM:		Thank	coords.	nt and end.	
	If "00" in ite Otherwise	em t3 and	"No" in item 14		Mark circ	le 2 in i	tem 9.	
	Ollierwise			NOTES	GO 10 76			
	Item No			NOTES				
	99	لىل			111			
	99 🔲							

8-5100-24 1990-10-22 STC/HSD-050-02962

FRANÇAIS AU VERSO

	A. e there expenditures in 1990 for ADDITION of			What was the to of WORK CONTI OUT? (Exclude to of any materials purchased separa	RACTED he cost that you	How much were MATE that you purchased?	RIAL
					Don't		Don't
17.	A garage or car port?	Yes No	1○→	S		S, .00	0
	Other structural extensions such as rooms, decks, garden sheds, etc.?	Yes	7○→	s0	0	\$00	
		No	80	1 1 1 1 1 1	20	3 .00	0
9.	An inground swimming pool?	Yes No	5○ → 6○	S .0	0 8O	\$.00	0
:O. 1	Fences, patios, driveways?	Yes No	3○→	\$.0	60	S .00	0
21. [Landscaping?	Yes	10→	s ₁	0	s ₁	0
	Were there expenditures for RENC This includes jobs such as remo walls, upgrading insulation and ac equipment and built-in appliances	odelli	ng room	s, adding or replace	ing doors a	nd windows, renovating en new homes, and the cost of	xterio of an
,	Yes 10 No 20	→ G	o to 26				
art	8.			What was the to	tal cost	How much were MATE	DIAL
	e there any RENOVATIONS or ERATIONS that involved			of WORK CONTI OUT? (Exclude to of any materials to purchased separa	RACTED he cost that you	that you purchased?	MAL
LT			10-	OUT? (Exclude to any materials to purchased separa	RACTED he cost that you tely.) Don't know	\$, .00	Don't now
13. A	ERATIONS that involved	Yes No		OUT? (Exclude to fany materials to purchased separa	PACTED he cost that you tely.) Don't know 0	\$.00 k	Don't know
3. A	A combination of interior and exterior work?	Yes No	volved in:	OUT? (Exclude to fany materials to purchased separa	RACTED he cost that you tely.) Don't know 0 4 d chimney: m	\$.00 k	Don't know
3. /	A combination of interior and exterior work?	Yes No that in Yes No	70 ->	OUT? (Exclude to of any materials to purchased separa) Stalling a fireplace and S0	RACTED he cost that you tely.) Don't know 4 4 d chimney: m	\$.00 60 coving an interior wall and ins	Don't know
(1)	A combination of interior and exterior work? (Example: a family room renovation to wall-to-wall) Exterior work only? (Examples: remodelled porch and report of the combination of the	Yes No What in Yes No	70	OUT? (Exclude to of any materials to purchased separa) Stalling a fireplace and S0	RACTED he cost that you tely.) Don't know 4 4 d chimney: m	s .00 60 coving an interior wall and ins	Don't know
23. A	A combination of interior and exterior work? (Example: a family room renovation to wall-to-wall) Exterior work only? (Examples: remodelled porch and report of the combination of the	Yes No Yes No Placed Yes No	ovolved in:	OUT? (Exclude to fany materials to purchased separa) Stalling a fireplace and stalling a fireplace and or; replaced living and stalling and stallin	BACTED he cost that you tely.) Don't know 4 4 d chimney: m	s .00 60 soving an interior wall and ins	Oon't now
24. H	A combination of interior and exterior work? (Example: a family room renovation twall-to-wall) Exterior work only? (Examples: remodelled porch and replacements only?	Yes No Yes No Placed Yes No	ovolved in:	OUT? (Exclude to fany materials to purchased separa) Stalling a fireplace and stalling a fireplace and or; replaced living and stalling and stallin	BACTED he cost that you tely.) Don't know 4 4 d chimney: m	s .00 60 soving an interior wall and ins	Oon't now
24. H	A combination of interior and exterior work? (Example: a family room renovation twall-to-wall) Exterior work only? (Examples: remodelled porch and replacements only?	Yes No Yes No Placed Yes No	ovolved in:	OUT? (Exclude to fany materials to purchased separa) Stalling a fireplace and stalling a fireplace and or: replaced living and stalling and stallin	BACTED he cost that you tely.) Don't know 4 4 d chimney: m	s .00 60 soving an interior wall and ins	Oon't now
24. 1	A combination of interior and exterior work? (Example: a family room renovation to wall-to-wall) Exterior work only? (Examples: remodelled porch and replaced from the condition of the condit	Yes No Yes No Placed Yes No	ovolved in:	OUT? (Exclude to fany materials to purchased separa) Stalling a fireplace and stalling a fireplace and or: replaced living and stalling and stallin	BACTED he cost that you tely.) Don't know 4 4 d chimney: m	s .00 60 soving an interior wall and ins	Oon't now
24. 1	A combination of interior and exterior work? (Example: a family room renovation to wall-to-wall) Exterior work only? (Examples: remodelled porch and replacement of the cowder room)	Yes No Yes No Placed Yes No	ovolved in:	OUT? (Exclude to fany materials to purchased separa) Stalling a fireplace and stalling a fireplace and or: replaced living and stalling and stallin	BACTED he cost that you tely.) Don't know 4 4 d chimney: m	s .00 60 soving an interior wall and ins	Oon't now

INTERVIEWER: REPLACEMENT refers to the installation of equipment or fixtures that replaced an existing unit.

Example: replacing an electric water heater with a gas model.

NEW INSTALLATION refers to the installation of equipment or fixtures that did not previously exist on the property, or that were installed in addition to the equipment or fixtures on the property. Example: installing a shower stall in what had been a half-bathroom.

Part C. Were there expenditures in 1990 for the purchase or installation of 26. Plumbing fixtures?	What was the total cost of WORK CONTRACTED DUT? (Exclude the cost of any materials that you purchased separately.)	How much were MATERIALS that you purchased?
Yes 10 No 20 - Go to 27		
1	Don't know	Don't know
For a replacement? Yes 30 No 40	5 .00 60	S .00 80
For a new installation? Yes 10 -> No 20	\$.00	\$.00
27. Heating or air conditioning equipment?		
Yes 7○ No 8○ — Go to 28		
For a replacement? Yes 10 - No 20	- S .000	\$.00
For a new installation? Yes 7 > No 8	S .00 .00	S .00
28. Electrical fixtures or equipment? (Include wiring	g.)	
Yes 50 No 60 — Go to 29		
For a replacement? Yes 70 - No 80	S .00 20	\$.00
For a new installation? Yes 50 -> No 60	\$.00	.00
29. Built-in appliances such as ovens, dishwashers	s?	
Yes 3		
For a replacement? Yes 50 No 60		\$ 100 20
For a new installation? Yes 30 No 40	5 .00 60	\$.00 7 80
30. Wall-to-wall carpeting?		
Yes 10 No 20 — Go to 31		
For a replacement? Yes 30 No 40		S .00 80
For a new installation? Yes 10 -	S .00	\$.00
31. Other fixtures or built-in equipment?		
Yes 7 ○ No 8 ○ → Go to 32		
For a replacement? Yes 10 - No 20	S .00 40	\$.00
SPECIFY ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		\$.00
No 8O	1 20	3 40
SPECIFY		
Norman Atra	NOTES	
99 L L L L L L L L L L L L L L L L L L		
99 🔲 📗		
99 🔲 [
99 1 11111111111		

	int b. ne following questions are about Ri	EPAIR	RS and M	MAINTENANCE cost	ts fe	or the dwelling	g(s) in 1990.	
ч	ere there any expenditures for			What was the of WORK CON OUT? (Exclude of any materials purchased sepa	tota TR. th	al cost ACTED e cost nat you	How much were I that you purchase	
						Don't know		Don't know
32	. Painting (interior or exterior)?	Yes No	10	s 3	.00		5	60
33	. Wall papering?	Yes No	7 ○ →	S	.00	20	S ₃	00
34	Repairs to interior walls and ceilings, plastering, drywall, panelling, tiling?		5○ → 6○	\$ 7	.00	80	S.	00 2
35.	Repairs to hard surface flooring and wall-to-wall carpeting? (Exclude wooden flooring.)	. Yes	3○→	S 5	.00	60	S	00
36.	Complete re-roofing?	Yes	1○→	S	.00	±O	s,	00
37.	Eavestroughing and other roof repairs?				.00	20	S	00
38.	Repairs to exterior walls including soffits, facia, foundations and chimneys? (Include chimney cleaning.)		5○→	S,	.00	80	s,	00 20
39.	Caulking and weather stripping, etc.? (Include replacement of insulation, vapour barriers, etc.)	Yes No	3O	S _s	.00	60	S ₇	000
40.	Repairs to outdoor patios, fences and driveways?	Yes No	10 -	S ₃	.00	40	s.	00 60
41.	Heating and air conditioning system? (Include service contracts.)	Yes No	7○ → 8○	\$,\	00	20	\$	00 40
42.	Plumbing?	Yes No	5○ → 6○	S ₇	00	90	\$ 1	20
43.	Electrical?	Yes No	3○ →	S	00	60	S	00 80
44.	Carpentry? (Include wooden flooring.)	Yes No	10 ->	\$ 3	00	40	s 5	60
45.	Other repairs and maintenance? Exclude housekeeping maintenance work such as rug cleaning, window washing, groundskeeping, snow removal, garbage removal, etc.	Yes No	SPECIF	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	00	2○	S ₁	200 40
	INTERVIEWER: THAI	NK RE	SPONDE	ENT AND COMPLET	E IT	EM 9 ON FRO	NT COVER	
	ttem No.			NOTES				
	99				1			

8-5:00-24

1990 Shelter Cost Survey



Survey Month: March 1991

Title: 1990 Shelter Cost Survey

Sponsor: Canada Mortgage and Housing Corporation/Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: Labour Force Survey assignments in rotation groups 1, 2, 3 and 6 across

Canada (45,000 households)

Objectives: One of the purposes of the Shelter Cost Survey is to provide jointly, with

the Survey of Consumer Finances (SCF) and the Survey of Household Facilities and Equipment (HFE), data which will permit the measurement of housing needs. Housing needs may be measured in terms of crowding, adequacy and affordability. For example, the data will show the incidence

of dwellings in which households are:

- in inadequate, crowded conditions,

- in unaffordable accommodations,

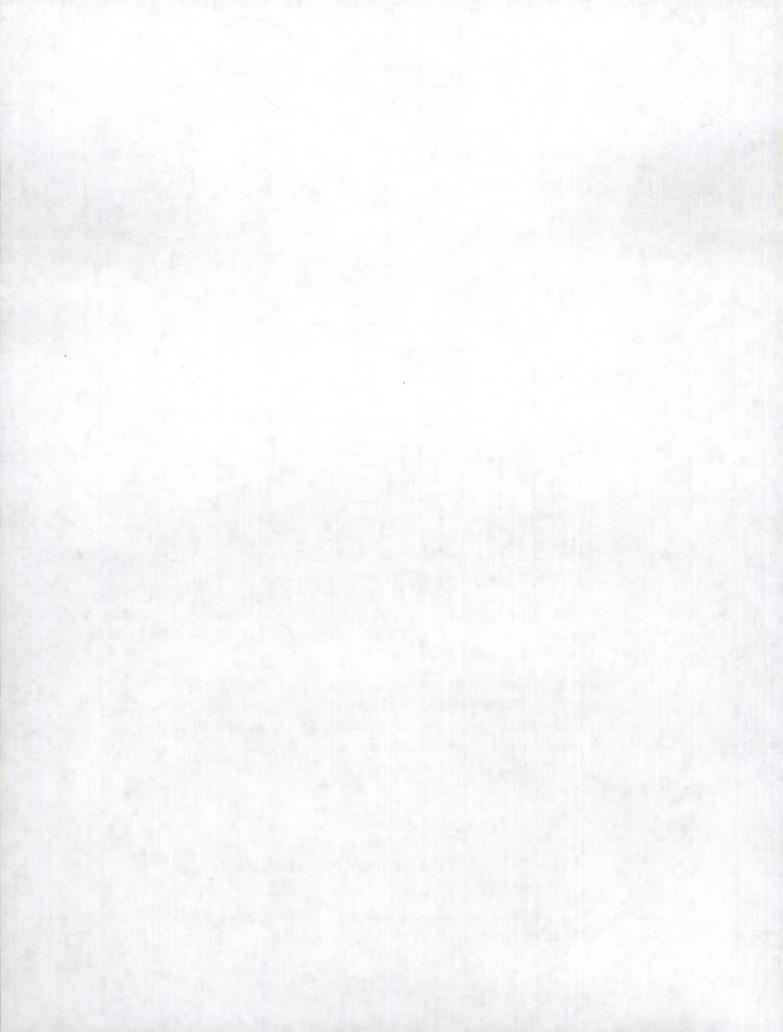
- are unable to improve their housing conditions without paying an

inexcessive portion of their income.

Project Manager: Robin Chaplin (951-4642)

Microdata: Yes Price No

Refer to the Survey of Consumer Finances





Confidential (when completed)

Collected under the authority of the Statistics Act. Revised Statutes of

				Canada, 1985, Chapter S19.
			Docket No.	Date Assignment No. 3 0 3 9 1 4
	PLACE LA	BEL HERE	Dwelling Type 5	Listing Address 6
			Language of Assignment	Telephone Number
9. COMPLE	TION STATUS			
LFS non-	interview	1 🔾	Partially completed	4 🔾
			Refused F08	5 🔾
Completed		3 🔾	Other non-response (specify in notes)	6 🔿
0. The Shelf	ter Cost survey i	s being conducted in orde	er to obtain information	on expenditures related to housing.
	ance, renovation	le, set up an appointment.		
First nam	e	Last name	н	RD page line no. (item 31, F03)
2. RECORD	OF CALLS AND	APPOINTMENTS		
Date	Time	Comments		Call back for:
1				
2				
3				
4				
3. INTERVIE	WER CHECK ITE	M ON FORM 03		
If yes on (dwelling		5 O Go to 22	If no on item 42 (dwelling not own	6 O Go to 14
			NOTES	
999	10.			
999				

8-5100-49 1990-10-22 STC-MLD-050-02962

FRANÇAIS AU VERSO

RENTERS ONLY		
14. How many months did your household occupy THIS dwelling in 1990?		
1 months If 00 Go to 21		
2 O Don't know		
Geep in mind that the following questions apply to costs for the month are not included in the rent. You should exclude any costs charged to business.	s you have just reported a	and tha
Vere there any expenditures in 1990 for		Don't know
5. Parking at place of residence? Yes No 20	\$.00	40
6. Electricity? Yes 5 No 6	\$.00	8 🔿
7. Other fuels for heating and cooking? Yes 10 - No 20	.00	40
8. Water?	\$.00	8 🔿
3. Repairs and maintenance on the rented dwelling? Yes 10 - No 20	\$.00	40
). Tenant's insurance?	\$.00	8 🔾
. Did your ancestors or those of any other member of your household designoups? North American Indian Métis Yes 1 No 2 or Inuit (Eskimo)	cend from any of the fol	llowing
INTERVIEWER: THANK RESPONDENT AND END Complete item 9 on front cover		
NOTES		
NOTES		
Item no.		
999		
999		
999		

8-5100-49

			HOMEOWNERS ON	LY -	THIS DWELLING		1 118
22	. What were the total pro	peri	ty taxes on this dwelling in	1 19:	90?		
	\$		Don't know				
23	For how much would the	nis d	lwelling sell today?				
	3	0	Don't know	4			
24.	Is there a first mortgage on this dwelling?	31.	Is there a second mortgage on this dwelling?	38.	Is there another loan that was used to pay for this dwelling or for additions, renovations, repairs and maintenance?	46.	Is there another loan that was used to pay for this dwelling or for additions, renovations, repairs and maintenance?
					Yes 1 0 No 2 0 -		Yes 1 O No 2 O -
	Yes 1 0 No 2 0		Yes 10 No 20		Go to 54		Go to 54
	Go to 38		Go to 38	-	Was this loan used		Was this loan used
25.	What is the amount of the regular payments?	32.	What is the amount of the regular payments?	39.	to pay for this dwelling?	47.	to pay for this dwelling?
	Sı		Sı ı		Yes 30 No 10		Yes 3 O No 1 O
	Don't know ² O		Don't know 4	40.	to pay for additions, renovations, repairs & maintenance	48.	to pay for additions, renovations, repairs & maintenance
00		-			Yes 5 0 No 6 0		Yes 5 O No 6 O
26.	Are these payments made	33.	Are these payments made	41.	What is the amount of the regular payments?	49.	What is the amount of the regular payments?
	monthly?		monthly?		\$ 00		\$ 11111100
	weekly? 2 O		weekly? 2 O				
	every two weeks? 3 O		every two weeks? 3 O		Don't know 8		Don't know 8
	intervals?		intervals?	42.	Are these payments made	50.	Are these payments made
	if 4, specify number		if 4, specify number		monthly? 1 O		monthly?
	of payments per year		of payments per year		weekly? 2 O		weekly? 2 O
					every two weeks? 3 〇		every two weeks? 3 O
	Don't know 5 🔿		Don't know 5 O		at other		at other
27.	What is the current rate of interest?	34.	What is the current rate of interest?		if 4, specify number		intervals?
					of payments		of payments
	1		1 %		per year		per year
	Don't know 2 🔾		Don't know 2 🔾		Don't know 5 🔘		Don't know 5 O
28.	Do these payments include property taxes?	35.	Do these payments include property taxes?	43.	What is the current rate of interest?	51.	What is the current rate of interest?
	Yes 3 🔘		Yes 3 O		1 %		1
	No 4 O		No 4 O		Don't-know 2 O		Don't know 2 O
29.	What is the balance outstanding at this time?	36.	What is the balance outstanding at this time?	44.	What is the balance outstanding at this time?	52.	What is the balance outstanding at this time?
	\$.00		\$.00		S		\$.00
	Don't know 6 O		Don't know 6 🔘		Don't know 4 O		Don't know + O
30.	INTERVIEWER	37.	INTERVIEWER	45.	INTERVIEWER	53.	INTERVIEWER
	If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies		If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies		If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies		If the respondent can only provide an estimate of the amount outstanding on a different date, record the amount above and report the date to which it applies
	1		1		1010		1
	month year 31		month year Go to		month year 46		month year 54

	HOMEOWNERS ONLY - THIS	DWE	LLING			
54.	How many months was this dwelling owned and occupied by	a men	nber of this	household in 1990)?	
	1	to 97				
55	When answering the following series of questions about home months that you have just reported. Only include ex	eowne	r costs, ke tures for th	ep in mind that the e home in which y	y apply	y to the
56.	What was the total amount paid in 1990 for homeowner's insu	rance?				
	\$					
57.	Were there any condominium charges in 1990?					
	Yes 5 O Go to 58 No 6 O Go to 63					
58.	What was the total cost of the condominium charges?				1	
	S Don't know 80					
Did	these condo charges include		Yes	No	Don't know	
59.	Taxes?		10	2 ()	3 🔾	
	Heat?		40	5 🔿	60	
	Electricity?		10	2 🔾	3 ()	
62.	Water?		40	5 🔿	60	
Wer	re there any expenditures in 1990 for			What was the total cost?		Don't know
63.	Water and sewage?	Yes No	10 	\$ 1 1 1 1 1	.00	40
64.	Electricity (include rental charges such as for hot water heaters)?	Yes No	5○→ 6○	\$ 7	.00	8 🔿
65.	Piped gas (include any rental charges such as for hot water heaters)?	Yes No	10-	\$ 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	.00	40
66.	Fuel oil and other liquid fuel?	Yes	5 O → 6 O	\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.00	80
67.	Other fuels (such as bottled gas, stove and fireplace wood, coal, charcoal, etc.)?	Yes No	10-	S 1 1 1 1 1 1	.00	40
	NOTES					
9	99					

	HOMEOWNE	RS ONLY - THIS DWELLING		
FOR THE FOLLOWING QUESTIONS,	PLEASE REP	ORT AN EXPENDITURE ONLY OF	NCE.	
Part A. Were there expenditures in 1990 for the ADDITION of		What was the total cost of WORK CONTRACTED OUT? (Exclude the cost of any materials that you purchased separately.)	How much MATERIALS that purchased?	were
68. A garage or car port?	Yes 1 0	Don't know	\$.00	Don't know
69. Other structural extensions such as rooms, decks, garden sheds, etc.?	Yes ⁷ ○ → No ⁸ ○	.00 20	\$.00	40
70. An inground swimming pool? .	Yes 5 O	-\$.00 8	\$1	20
		7	,	
71. Fences, patios, driveways?	Yes 3 O	.00 6	\$.00	8 ()
72. Landscaping?	Yes ¹ ○ → No ² ○	.00 40	\$.00	60
73. Were there expenditures for REN				
Part B.		What was the total cost WORK CONTRACTED OUT		were
Were there any RENOVATIONS or ALTERATIONS that involved		(Exclude the cost of armaterials that you purchase separately.	ny purchased?	you
74. A combination of interior and exterior work?	Yes ³ O →	Don't know	\$.00	Don't know
(Example: a family room renovation to and installing wall-to-wall)	hat involved in:	stalling a fireplace and chimney; mo	ving an interior wall	
75. Exterior work only?	Yes 1 0	\$ 00 40	\$.00	60
(Examples: remodelled porch and re	eplaced front d	oor; replaced living and dining room	windows)	
76. Interior work only?	Yes ⁷ ○ → No ⁸ ○	\$.00 20	\$.00	40
(Examples: installed seamless floor is added a powder room)	n kitchen, insui	lated basement walls and partitioned	d off laundry room:	
		NOTES		
Item No.				
999				
999				
999	1111			
999	1111			

8-5100-49

HOMEOWNERS ONLY - THIS DWELLING

INTERVIEWER: REPLACEMENT refers to the installation of equipment or fixtures that replaced an existing unit. Example: replacing an electric water heater with a gas model.

NEW INSTALLATION refers to the installation of equipment or fixtures that did not previously exist on the property, or that were installed in addition to the equipment or fixtures on the property. Example: installing a shower stall in what had been a half-bathroom.

	property. Exa	ample: installing a sho	wer st	all in wha	t had been a half-bat	hroom	on the	
Part C. Were there expenditures in 1990 fo the purchase or installation of		What was the total cost of How WORK CONTRACTED OUT? MATERIAL (Exclude the cost of any purchased materials that you purchased separately.)						
77. Plumbing fixtures?								
Yes 10 No 20		Go to 78						
				Don't know			Don't know	
For a replacement?	Yes 3 ()	5	.00	6○	7	.00		
For a new installation?	Yes 1 O -	. \$.00	40	\$.00	60	
78. Heating or air conditioning equip	ment?							
Yes 70 No 80 .		Go to 79						
For a replacement?	Yes 1 O -	3	.00	40	\$ 5	.00	60	
For a new installation?	Yes ⁷ ○ → No ⁸ ○	· \$.00	50	\$ 1	.00	40	
79. Electrical fixtures or equipment?	(include wirin	g.)						
Yes 50 No 60 -	,	* .						
1								
For a replacement?	_				\$			
For a new installation?	Yes 5 ○ → No 6 ○	- S	.00	80	\$ 1	.00	20	
80. Built-in appliances such as oven:	s, dishwasher	s?					210	
Yes 30 No 40 -	G	So to 81						
↓				-				
For a replacement?					\$ LILLIAN	.00	20	
For a new installation?	Yes 3 ()	\$ 5	.00	60	\$.00	80	
81. Wall-to-wall carpeting?								
Yes 10 No 20 -	G	io to 82						
For a replacement?			.00	6O	7	.00		
For a new installation?	Yes 1 0	3	.00	40	\$.00	60	
32. Other fixtures or built-in equipme								
Yes 70 No 80 -	- G	io to 83						
For a replacement?	Yes 1 O -	SILLILI	.00	40	SI	.00	60	
	No 2 O	3			5	1		
For a new installation?	Yes 7	\$1	.00	20	Si	.00	40	
CPE	No 8 O	,			3			
SFE	CIFY []]		
		NOTES						
999	1111	1111111						
999			1.1					
999			1 1					

HOMEOWNERS ONLY - THIS OWELLING

Part D.	TOMEO TITLE	HS ONLY - THIS DW	LLLING							
The following questions are about R	EPAIRS and N	IAINTENANCE costs	for the dwelli	ng in 1990.						
Were there any expenditures for		What was the total cost of WORK CONTRACTED OUT? MATERIALS that (Exclude the cost of any materials that you purchased separately.)								
			Dont't know		Dont't know					
83. Painting?	Yes 1 ○ → No 2 ○	\$.00 40	\$.00	6 🔾					
84. Wall papering?	Yes 7 0	\$ 1	.00 20	\$.00	40					
85. Repairs to Interior walls and ceilings, plastering, drywall, panelling, tiling?	V 5 O				• •					
patienting, unity:	No 6 O	\$ 1	.00 8 00.	\$.00	20					
86. Repairs to hard surface flooring and wall-to-wall carpeting? (exclude wooden flooring.)	Yes 3 ○ →	\$ 11111	.00 6 🔾	\$.00	8 🔾					
87. Complete re-roofing?		\$ 11111		\$00	6 🔾					
88. Eavestroughing and other roof repairs?	Yes 7 0	\$ [.00 20	\$ 1 1 1 1 .00	40					
89. Repairs to exterior walls including soffits, facia, foundations and chimneys? (Include chimney cleaning.)	Yes 5 O	\$ 1 1 1 1 1	.00 8 🔾	\$.00	20					
 Caulking and weather stripping, etc.? (include replacement of insulation, vapour barriers, etc.) 	Yes 3 O	\$.00 6 🔾	\$ 1111 .00	8 🔾					
31. Repairs to outdoor patios, fences and driveways?	Yes 1 ○ → No 2 ○	\$ [] .	.00 4 🔾	\$ 1 1 1 .00	6 🔾					
32. Heating and air conditioning system? (include service contracts.)	Yes 7 ○ → No 8 ○	\$.00 20	\$ 1 1 1 1 .00	40					
93. Plumbing?	Yes 5 ○ → No 6 ○	S LIIIII	08 00.	\$ 1 1 1 1 .00	20					
94. Electrical?	Yes 3 ○ → No 4 ○	\$.00 6 🔾	\$ 1 1 1 1 .00	80					
95. Carpentry? (wooden flooring.)	Yes 1 0	\$ []] .	.00 4 🔾	\$.00	6 🔾					
36. Other repairs and maintenance?	Yes 7 ○ → No 8 ○		00 20	\$ 1111 .00	40					
Exclude housekeeping maintenance work such as rug cleaning, window washing, groundskeeping. s n o w emoval, garbage removal,	SPECIFY "OTHER"									
		NOTES								
999										
999										
999										

		- 9 -					
	HOMEOWNE	RS ONLY - OTHER	DWE	LLINGS			
7. Did anyone in	this household occupy any o	ther dwellings in 1	990 th	at they ow	ned? Exclude v	acation I	ome
	How many	For how many			Was this		
Yes 10 —	other dwellings?	months in 1990?		gle family elling?	an apartment?	another to	
		1: 🔲		0	20	3 (
		2:		0	50	60	
Go	to 140	3:	- 7	0	80	90	
	ng the following series of que hs in the dwelling(s) you have		owne	r costs, ke	ep in mind that t	they app	y to
9. What was the	otal amount paid in 1990 for i	homeowner's insu	rance?	?			
\$.00 Do	on't know 2 O					
00. Were there any	condominium charges in 199	90?					
	Go to 101						
No 40 —	Go to 106						
01. What was the t	otal cost of the condominium	charges?					П
\$ 1111	.00 Do	on't know 6					
Old these condo ch	arges include			Yes	No	Don'	
02. Taxes?				10	20	3 🔾	
03. Heat?				40	5 🔾	6 🔿	
04. Electricity?				10	20	3 ()	
05. Water?				40	5 🔾	6 ()	
Vere there any expe	enditures in 1990 for				What was th total cost?	e	Do
106. Water and sewa	age?		Yes No	10 -	\$ 1 1 1 1	.00	4 (
	iude rental charges such a		Yes	5○→	\$.00	8
			No	60	7		
	ude any rental charges such	as for hot water	Yes	10→	\$.00	4
			No	20	3		
09. Fuel oil and oth	ner liquid fuel ?		Yes No	5○ → 6○	5 1 1 1 1	.00	8
	ich as bottled gas, stove and		Vac	10		. 00	4
coai, charcoai,	etc.)?		Yes	20	3	.00	4

	Rem no.																																					
999		L	_	1	L	L	_1		L	1	1		_	L	1		L	1	1		1		1		 _	1	1	1	1		L	L	L	1	1			
999		L		_	ı	1			L	1	1	1		L	1		1	1	1		1		1	1	1	1	1	1	1		L	1	L	1			L	
999		1		L	L	1	1		1	1	1	1			1	1	1	L	1	1	1	1	1	1	1	1	1	1	1		1	1	L	1	1	1		

NOTES

н	OMEOWNERS	ONLY - OTHER DWEL	LINGS		
FOR THE FOLLOWING QUESTIONS,	PLEASE REPO	ORT AN EXPENDITURE	ONLY ONC	E.	
Part A. Were there expenditures in 1990 for the ADDITION of		What was the total WORK CONTRACTED (Exclude the cost materials that you pu separately.)	OUT?	How much MATERIALS that purchased?	were you
111. A garage or car port?	Yes ¹ ○ → No ² ○	\$.00	Don't know	\$.00	Don't know
112. Other structural extensions such as rooms, decks, garden sheds, etc.?	Yes ⁷ ○ → No ⁸ ○	\$.00	2 ()	\$.00	40
113. An inground swimming pool? .	Yes ⁵ ○ → No ⁶ ○	\$.00	8 🔾	\$.00	2 ()
114. Fences, patios, driveways?	Yes ³ ○ → No ⁴ ○	\$.00	60	\$.00	8 🔿
115. Landscaping?	Yes ¹ ○ → No ² ○	\$.00	40	.00	60
This includes jobs such as rem walls, upgrading insulation and any equipment and built-in appli. Yes 1 O No 2 O -					
Part B. Were there any RENOVATIONS or ALTERATIONS that involved	11.5	What was the total of WORK CONTRACTED (Exclude the cost of materials that you pur separately.)	OUT?	How much MATERIALS that purchased?	were
117. A combination of interior and exterior work? (Example: a family room renovatinstalling wall-to-wall)				,	Don't know 8 O all and
118. Exterior work only?	Yes 1 0 No 2 0		4 O	S .00 .00 .00 .00 .00 .00 .00	60
119. Interior work only?	Yes ⁷ O		² and partition	ned off laundry room, a	
powder roomy		NOTES			
item no. 999		NOTES			
999			ш		

HOMEOWNERS ONLY - OTHER DWELLINGS

INTERVIEWER: REPLACEMENT refers to the installation of equipment or fixtures that replaced an existing unit. Example: replacing an electric water heater with a gas model.

NEW INSTALLATION refers to the installation of equipment or fixtures that did not previously exist on the property, or that were installed in addition to the equipment or fixtures on the property. Example: installing a shower stall in what had been a half-bathroom.

	e ther		litures in 1 ation of		the	Ą.	- (NOR Exclinate	K CO	the to NTRAC he co nat you	TED	OUT? of any chased	MA	w TERIAL chased		that	were
120	Plum	bing fixtu	1708?														
120		-	No	20			Go	to 12	1								
	103	1	140	0			-	10 12				Don't					Don't
	For a	replacer	ment?		Yes	30 -	- 5	SI .	1 1 1	. 1	.00	know 6	\$1.		. 1	.00	know 8
			ment?		No	40	5						7				
	For a	new insi	tallation?		Yes	10-	- 5		Ш		.00	40	\$ 4			.00	60
121	Heati	ing or air	condition	ina equi	nmen	12											
		_	No				Go	to 12	2								
		1	140	0			00	10 12									
	For a	replacer	nent?		Yes	10-	÷ 5			. T.	00	40	SI.		. 1	00	60
			nent?		No	20	3						5				
	For a	new inst	tallation?		Yes	70-	- 5				.00	20	SLL			.00	40
122			res or equ														
122.			No No						2								
	163		140	0			GO	10 12	3								
	For a	replaces	nent?		Yes	70 -	- 9			. 1	00	20	SI .		. 1	00	40
		· · · · · · · · · · · · · · · · · · ·	nent?		No	80	1				.00	20	3	111		.00	
	For a	new inst	allation?		Yes	50-		1			00	80	SI			00	20
	1012	TICW HIS	allation?		No	60	7				.00	-0	1	111		.00	-0
123			nces such														
I down			No						A								
	163	0	140	0 -			GO	21 01	7								
	For a	replacen	nent?		Voc	50-	- 0	1 .			.00	80	CI.	11-17		00	20
		ropidocii	nent?		No	60	7				.00		1	111		.00	-
											.00	60	SI.			00	80
			allation?		No	40	5				.00		7			.00	
124.		to-wall ca															
1 60 41			No	20			Go	10 12	5								
		T		0													
	For a	replacen	nent?		Yes	30-	- 5	1 .		. 1	.00	60	SI.		. 1	.00	80
			nent?		No	40	5						7	111			
	For a	new inst	allation?		Yes	10-	- S	1 .		. 1	.00	40	SI.		. 1	.00	60
			allation?		No	20	3	ш					5	111			
125.	Other	fixtures	or built-in	equipm	ent?												
	Yes	70	No	80 -			Go	10 12	6								
		Ĭ															
	For a	replacen	nent?		Yes	10-	→ S	1.	1 1 1	. 1	.00	40	SI,		. 1	.00	60
						20	3						5				
				SPE	CIFY		1.	Ш.		1.1.1	11			1 1 1	ш		
	For a	new inst	allation?		Yes	70-	S	1	1 1 1	+ 1	.00	20	\$	1 1 1	1.1	.00	40
					No	80	1						3				
				SPE	CIFY	L					11						
								NO	TES								
	Iter	n no.															
99	9 🗌					11		1.1					1.1.1	1.1.1	11		
99			1111	1 1 1		1	1 1	1 1					1 1 1	1 1 1			
99	9 🗀																
99	9				11	11							111	111			

							- 1	2 -	_				_				
		IOME	OW	NE	RS	10	4LY	- 0	тн	ER C	WEL	LINGS					
Part																	
The	following questions are about RI	EPAIF	RS a	and	MA	IN	TEN	MAN	ICE	cost	s for	the dwel	ling	(s) in 1990),		
Wer	e there any expenditures for				- (WC Ex ma	RK	de als	the tha	TRA	CTED	cost of OUT? of any irchased		How MATERIA purchase	LS	that	were
												Don't know					Don't know
126.	Painting?	Yes	2 (0-	*	\$ [1.	П	Ш	.00	40	5	,	لب	.00	60
127.	Wall papering?	Yes	7 (0-	-	s [_1	1	П	Ш	.00	2 🔾	3		لب	.00	40
128.	Repairs to interior walls and																
	ceilings, plastering, drywall, panelling, tiling?	Yes	5 (0-	- 5	5 [1			.00	8 🔾	5		لب	.00	20
129.	Repairs to hard surface flooring and wall-to-wall carpeting? (exclude wooden flooring.)	Yes	3 (o-	+ 9	5	1	-		1 1	.00	6 🔾	S			.00	8 🔿
130	Complete re-roofing?																
ı wu.	complete re-tooling.	No	2 (5	3	5 [1.	1_1		.00	40	5			.00	60
131.	Eavestroughing and other roof repairs?	Yes	7 (0-	- 5	5 L	1	1			.00	2 🔾	3			.00	40
	Repairs to exterior walls including soffits, facia, foundations and chimneys? (include chimney cleaning.)	Yes No	5 (0-	7			1		ı	.00	8 🔾	\$	نسا		.00	20
133.	Caulking and weather stripping, etc.? (include replacement of insulation, vapour barriers, etc.)	Yes No	3 (0 -	> 5	i L				ı.	.00	6 🔾	\$.00	80
134.	Repairs to outdoor patios, fences and driveways?	Yes	1 (0 -	- 9	5 [1.	1			.00	40	\$.00	6 🔾
	Heating and air conditioning system? (include service contracts.)											2 🔾					
136.	Plumbing?	Yes No									.00	8 🔾	\$.00	20
137.	Electrical?	Yes No									.00	60	\$ 7		لبا	.00	8 🔾
138.	Carpentry? (include wooden																

138. Carpentry? (include wooden					
flooring.)	Yes 1 ○ → No 2 ○	\$ 4	00 40	5 11111 .0)0 6
139. Other repairs and maintenance?					
maintenance:	Yes 7 O	S LIIII	.00 20	\$	00 4
Exclude housekeeping maintenance work such as rug cleaning, window	140 00				
washing. groundskeeping, snow removal, garbage removal, etc.	SPECIFY "OTHER"				
140. Did your ancestors or those of a following groups?	ny other mem	ber of your househol	d descend fro	om any of the	
North American Indian					
Métic Yes	10	No. 20			

INTERVIEWER: THANK THE RESPONDENT AND END Complete item 9 on front cover

8-5100-49

or Inuit (Eskimo)

Survey of Job Opportunities



Survey Month: March 1991

Title: Survey of Job Opportunities

Sponsor: Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: All rotation groups

Objectives: The purpose of this survey is to identify:

- the actual participation patterns of persons inactive due to labour market conditions or their own preferences,

- the desired participation patterns of persons inactive due to labour market conditions or their own preferences,

- the type of work desired by such individuals,

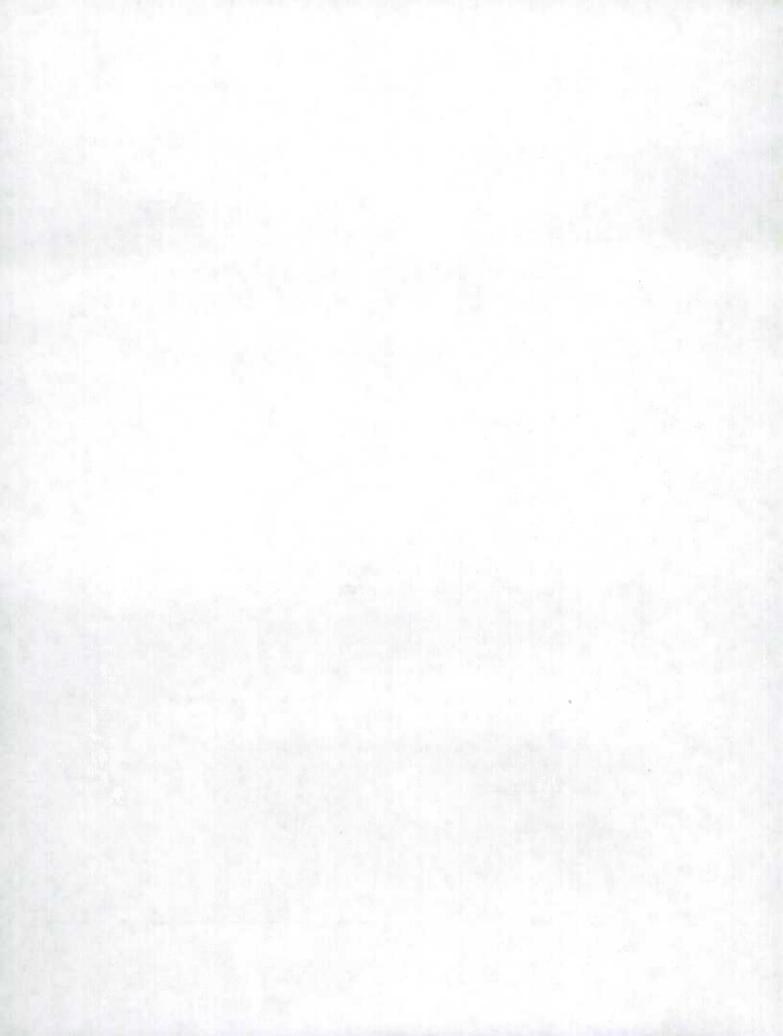
- those persons who have become discouraged looking for work and believe that no suitable jobs are available,

those persons who are seriously interested in taking a job but know that
jobs are not available in their community due to seasonal or economic
conditions.

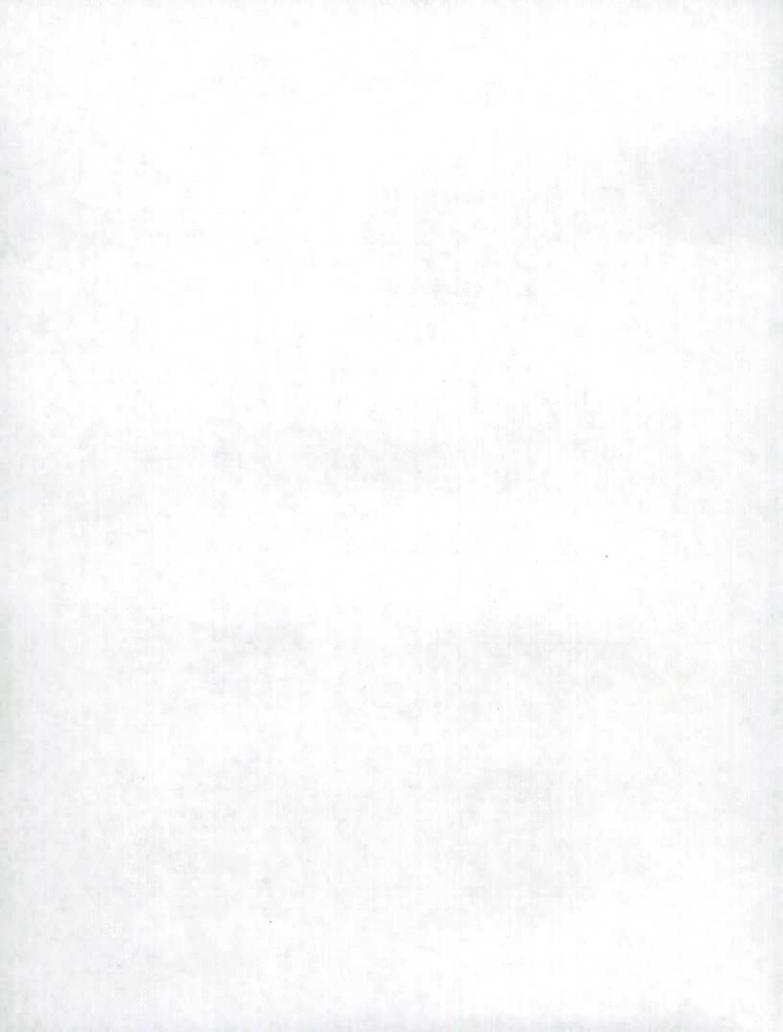
Project Manager: Denis Lefebvre (951-4600)

Microdata: Yes Price No

X \$500.00



	Statistics Canada Statistique Canada SU	RVEY OF JOB OPPORTUNITIES	CONFIDENTIAL when completed
	Doctat No 2 Survey date 3 page - line No Given name	Assignment No. 4	1 romino (
5	6	7	TOWN TO
INTER	RVIEWER CHECK ITEM: On FORM 05	74	10
		14 DID WANT A JOB LAST WEEK?	19 DOES WANT A FULL-TIN JOB OR A PART-TIME JOB?
	ank in Item 50 'END.	Yes 1 No 2 ao to 24	
· // ``Ye	'es" or "No" in Item 50 2	0 0 0	Full-time '
	Complete the 2 reference items	15 WHAT WAS THE MAIN REASON THAT DID NOT LOOK FOR	Part-time ²
	below by copying	WORK LAST WEEK?	Either full-time or
District Co.	from the FORM 05		part-time ²
			20 WOULD MOVE TO
		Enter code	ANOTHER LOCATION IN THE
		16 WAS THERE ANY REASON	PROVINCE IF A SUITABLE JOB WERE OFFERED?
16.		THAT COULD NOT TAKE A	
		JOB LAST WEEK?	Yes 1 No 2
			21 WOULD MOVE TO
	LETE THE REMAINING ITEMS ON THIS FORM 06,	Enter code and	ANOTHER PROVINCE IF A
	RRING TO ITEMS 56 AND 57 ABOVE, CESSARY.	go to 24	SUITABLE JOB WERE OFFERED?
		17 DOES WANT A JOB TO	Yes 'O No 'O
	NTERVIEWER CHECK ITEM:	LAST FOR LESS THAN 6	
	W"Yes" in Item 56 1 go to 11	MONTHS OR MORE THAN 6 MONTHS?	22 DOES EXPECT TO BE WORKING AT ANYTIME IN
	# "No" in Item 56 2 go to 12	000	THE NEXT 6 MONTHS?
	# "Blank" in Item 56 3 END	6 months or less 16	
11 /A	NTERVIEWER CHECK ITEM:	More then 6 months2	Yes 1 No 2 2
	# "Nothing" circle marked	Length of employ- 00 19	23 DOES EXPECT TO BE
	in Item 57 90 to 14	Length of employ- ment does not	WORKING FOR A FORMER EMPLOYER?
	Otherwise * END	metter	
	ASLOOKED FOR WORK AT ANYTHME IN THE		Yes 'O No 'O
		18 WHAT IS THE MAIN REASON	24 INFORMATION SOURCE:
Ye	No 2 go to 14	THAT WANTS A JOB TO LAST FOR LESS THAN 6	Enter HRD page-line
13 w	WHAT WAS THE MAIN REASON THAT STOPPED	MONTHS?	number of person providing the above
LC	OOKING FOR WORK?		information.
	Enter code	Enter code	
-	Entire case		
	CODES	A Own illness or	disability
		B Child care resp	onsibilities - own children
			or family responsibilities
		16 D Going to school E Already has a in	
-	A Own illness or disability	N No reason give	
	B Child care responsibilities - own childs	ren O Other - Specify	
	C Other personal or family responsibilitie D Going to school	95	
	E No longer interested in finding work	A Own illness or	disability
13	F Waiting for recall (to former job)	B Child care resp	onsibilities - own children
15	G Has found new job H Waiting for replies from employers		or family responsibilities
	Believes no work available (in area, or	school full-time	education or returning to
	suited to skills)	19	le (in area or suited to skills)
	N No reason given		than six months
-	O Other - Do not specify in NOTES	employer	rn to a former job or
		O Other - Specify	in NOTES
		99 NOTES	See over for additional NOTE
- 1		, Ren to	
Barri No.			
1 10 mm			



Survey of Consumer Finances



Survey Month: April 1991

Title: Survey of Consumer Finances

Sponsor: Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: LFS rotation groups 1, 2, 3 and 6 (45,000 households across Canada)

Objectives: The survey is the only source providing up-to-date information on the

distribution and sources of income, before and after tax, for families and individuals. Key measures produced include female-to-male earnings ratios and low income rates for major socio-economic groups such as the elderly, lone-parent families and children. Statistics on income distributions and on low income for these and other groups are essential for evaluating present programs and for planning future policies affecting the

well-being of all Canadians.

Project Manager: Kevin Bishop (951-2211)

Microdata: Yes Price No

X \$1,000.00

Five microdata tapes are produced annually, at a cost of \$1,000.00 each. They are:

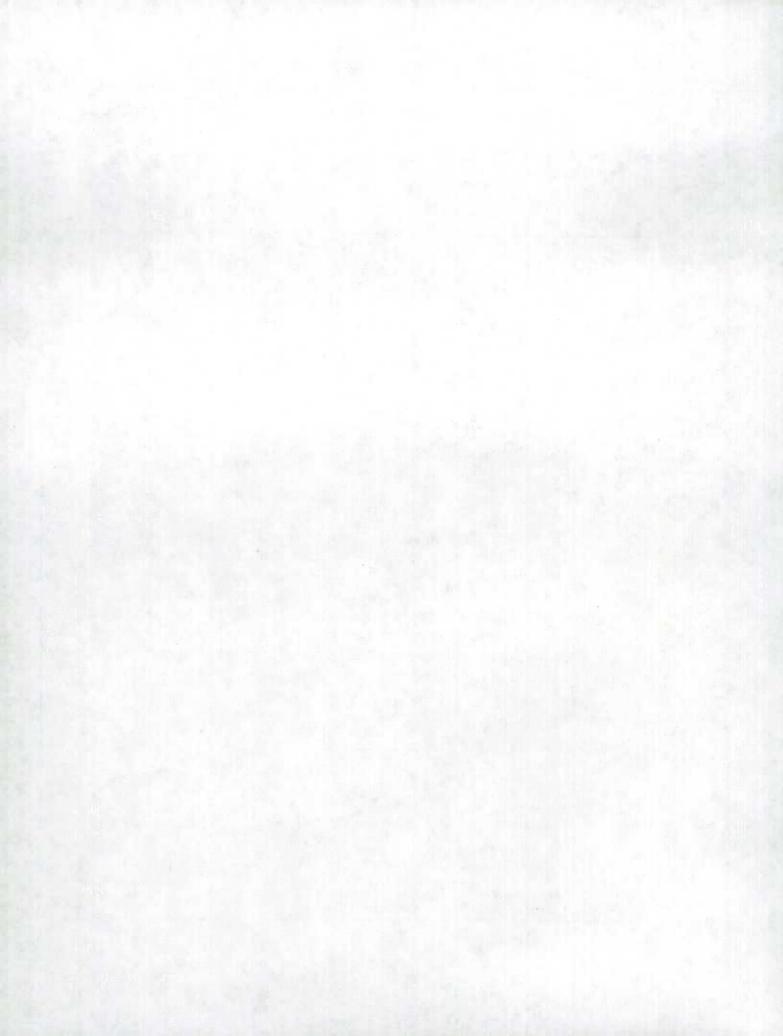
- Economic Families,

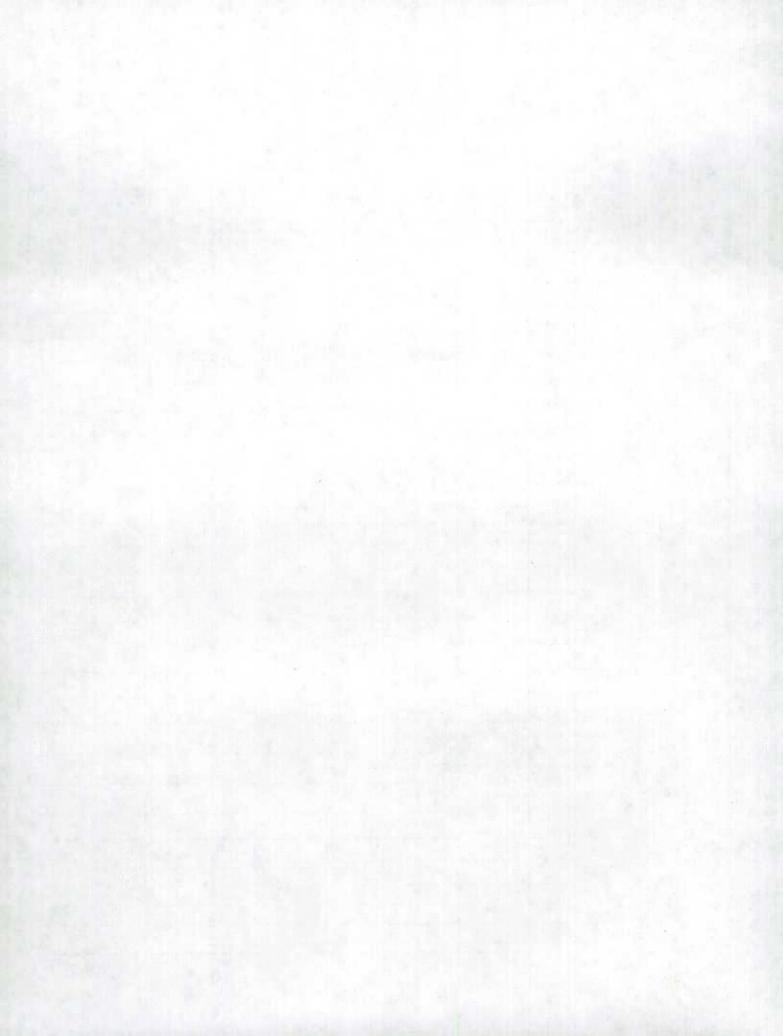
- Census Families,

- Individuals with Income,

- Household Income Facilities and Equipment,

- Key File (for linkage of preceding four files).





Household Environment Survey



Survey Month: May 1991

Title: Household Environment Survey

Sponsor: Environment and Natural Resources Group/Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: LFS rotation groups 1, 2, 3 and 6 (43,000 households across Canada)

Objectives: To collect information on the extent to which households are adopting

facilities, products, and behaviours that are "environment-friendly".

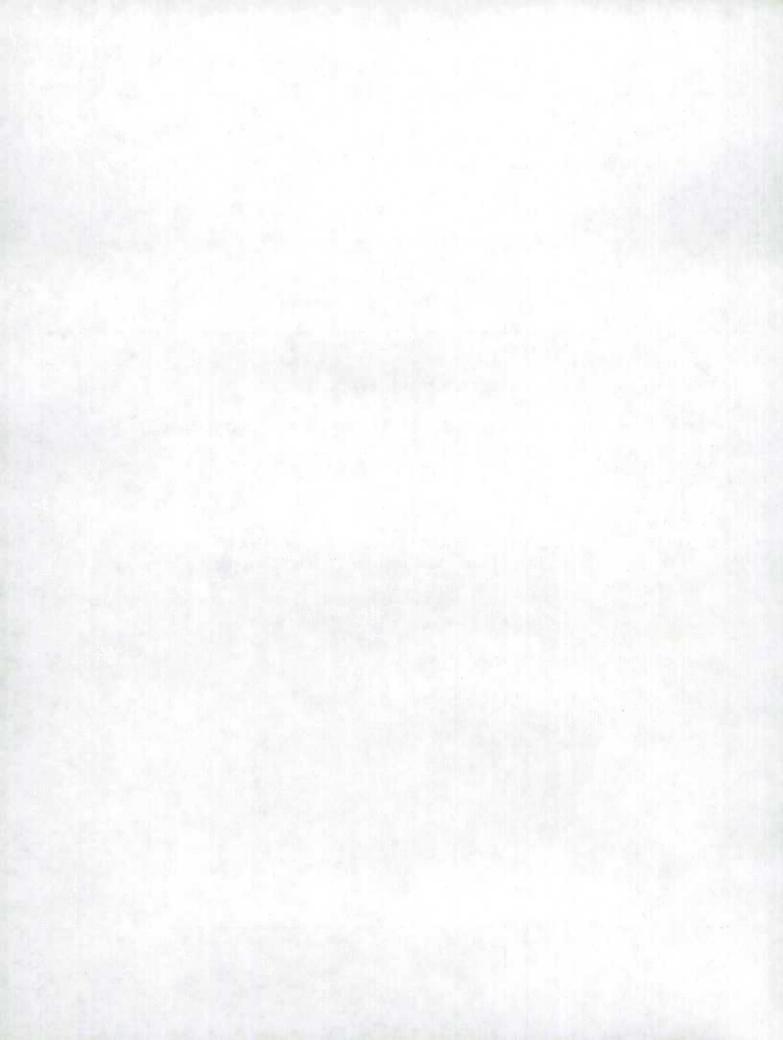
A benchmark for future surveys on the changes in household behaviour

that may result from public concern about the environment.

Project Manager: Penny Barclay (951-4634)

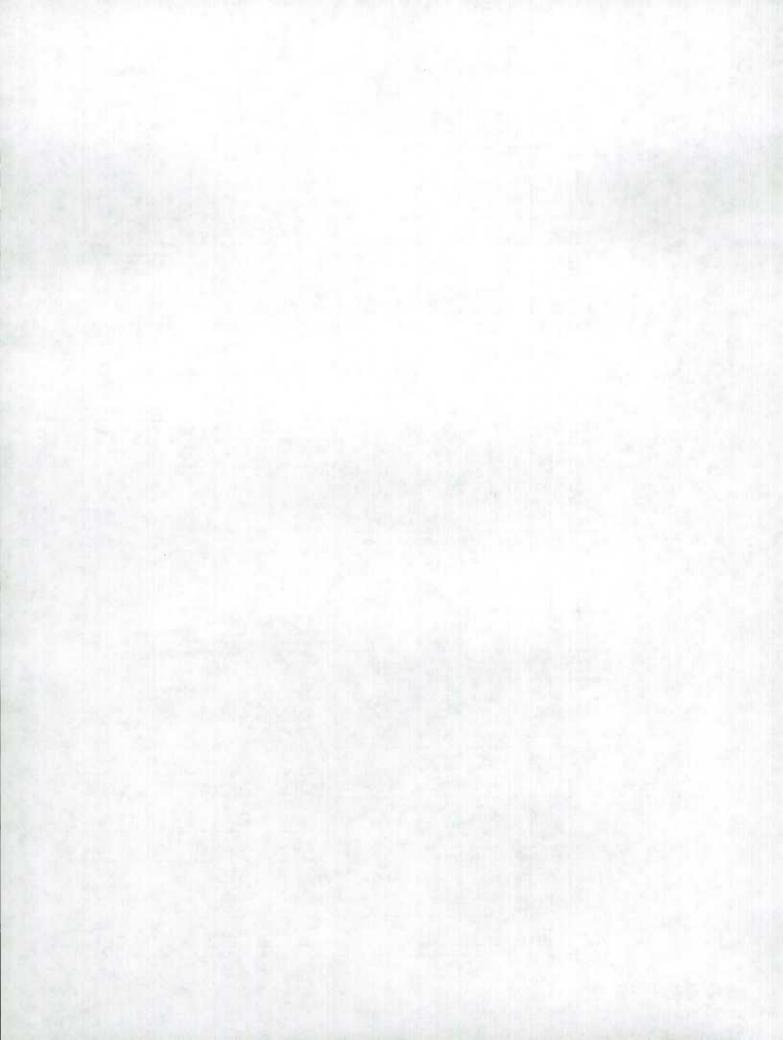
Microdata: Yes Price No

X



НО	USEHOLD ENVIRONM	IENT SURVEY		Statistics Act, R.S.C. 1985, c. S19
R.O.	Docket No.	Survey date	Assignment No.	
	2	3	4	5 Response Code
TRODUCTION	N: THE FOLLOWING QUESTIONS	ARE ENVIRONMENT RE	ATED.	
DES THIS HO	SUSEHOLD HAVE ACCESS TO CL	JRBSIDE RECYCLING OR		DOES THIS HOUSEHOL

3	5 Code
INTRODUCTION: THE FOLLOWING QUESTIONS ARE ENVIRONM	ENT RELATED.
DOES THIS HOUSEHOLD HAVE ACCESS TO CURBSIDE RECYCL RECYCLING DEPOTS FOR:	ING OR DOES THIS HOUSEHOLD USE THIS SERVICE?
No	Don't know Yes Yes No
10. PAPER? 1 Go to 12	20 Go to 12 30 - 11. 10 20
12. METAL CANS? 4 Go to 14	5○ Go to 14 6○→ 13, 3○ 4○
14. GLASS BOTTLES? 1 Go to 16	2 Go to 16 3 - 15. 5 6
16. PLASTICS? 4 Go to 18	5 Go to 18 6 → 17. 7 O 6 O
18. DOES THIS HOUSEHOLD HAVE ACCESS TO SPECIAL DISPO FOR HOUSEHOLD HAZARDOUS PRODUCTS SUCH AS PAINT BATTERIES, ETC.?	DSAL PROGRAMMES 19. DOES THIS 15. CHEMICALS, HOUSEHOLD USE THIS SERVICE?
No Don't know	Yes Yes No
1 Go to 20 2 Go to 20	. 3○→ . 4○ 5○
20. INTERVIEWER CHECK ITEM: If any age in item 33 of F03	30. IN WINTER, IS THE THERMOSTAT SETTING REGULARLY LOWERED?
is 00 or 01	Yes 1 No 2 Don't know 3
Otherwise	2 31. DOES THIS DWELLING HAVE ANY ENERGY EFFICIENT COMPACT FLUORESCENT LIGHT BULBS? INCLUDE SCREW-IN BULRS ONLY
21. ARE DISPOSABLE DIAPERS USED FOR THE CHILD(REN) ALL OF THE TIME? 1 NEVER?	
MOST OF THE Children) not	LAST WEEK, HOW MANY HOUSEHOLD MEMBERS USED THE
TIME?	FOLLOWING AS THEIR PRINCIPAL METHOD OF TRAVEL TO WORK:
SOMETIMES?3	32. NO ONE WORKING OUTSIDE THE HOME 1 Go to 39
22. DOES ANYONE IN THIS HOUSEHOLD REGULARLY BUY PAPER TOWELS OR TOILET PAPER MADE FROM RECYCLED PAPER?	No. of persons 33. PUBLIC TRANSIT?
Yes 1 O No 2 O Don't know 3 C	
3. DOES ANYONE IN THIS HOUSEHOLD REGULARLY TAKE THEIR OWN BAG WHEN SHOPPING?	35. MOTOR VEHICLE AS PASSENGER?
Yes 4 Don't know 6	36. BICYCLE?
No ⁵ ○ Not applicable ⁹ ○	37. WALK ONLY?
4. DOES THIS DWELLING HAVE A YARD, LAWN OR GARDEN?	38. OTHER? (specify in Notes)
Yes 1 No 2 Go to 27	39. IN THIS DWELLING, IS THERE A WATER SAVING, LOW FLOW OR MODIFIED SHOWER HEAD?
N THE LAST TWELVE MONTHS, DID ANYONE, INCLUDING COMMERCIAL OPERATORS, APPLY THE FOLLOWING HEMICALS TO THE YARD, LAWN OR GARDEN:	Yes 1 Don't know 3 No 2 Not applicable 9 O
Yes No Don't know	140 C 1401 applicable - C
5. PESTICIDES? 1 2 3	40. IN THIS DWELLING, IS THERE A WATER SAVING, LOW VOLUME TOILET OR MODIFIED TOILET TANK? (Include
6. FERTILIZERS? 4 5 6	brick, bottle, etc.) Yes 4 Don't know 6
7. DOES THIS HOUSEHOLD USE A COMPOST HEAP, CONTAINER, OR COMPOSTING SERVICE?	Yes 4 Don't know 6 No 5 Not applicable 9
Yes 1 O No 2 O Don't know 3 C	DRINKING WATER? (Attached to tap or as a stand alone
8. IS THERE A THERMOSTAT IN THIS DWELLING TO CONTROL THE TEMPERATURE?	Container) Yes 1 No 2 Don't know 3
Yes 1 O No 2 O Go to 31	42. IN THE LAST FOUR WEEKS, HAS ANYONE IN THIS
9. IS IT A PROGRAMMABLE THERMOSTAT?	HOUSEHOLD PURCHASED BOTTLED WATER FOR DRINKING AT HOME? (Do not include soda water, tonic water or other carbonated drinking water)
Yes 4 Go to 31 No 5 Don't know 6	Yes 4 No 5 Don't know 6
OTES	



1991 Household Facilities and Equipment Survey



Survey Month: May 1991

Title: 1991 Household Facilities and Equipment Survey

Sponsor: Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: LFS rotation groups 1, 2, 3 and 6 (43,000 households across Canada)

Objectives: The HFE provides an annual profile of dwelling characteristics and the

facilities and equipment they contain. This data are used by private industry to analyze market trends in order to anticipate future demand and by governments for policy development and analysis of current

programs.

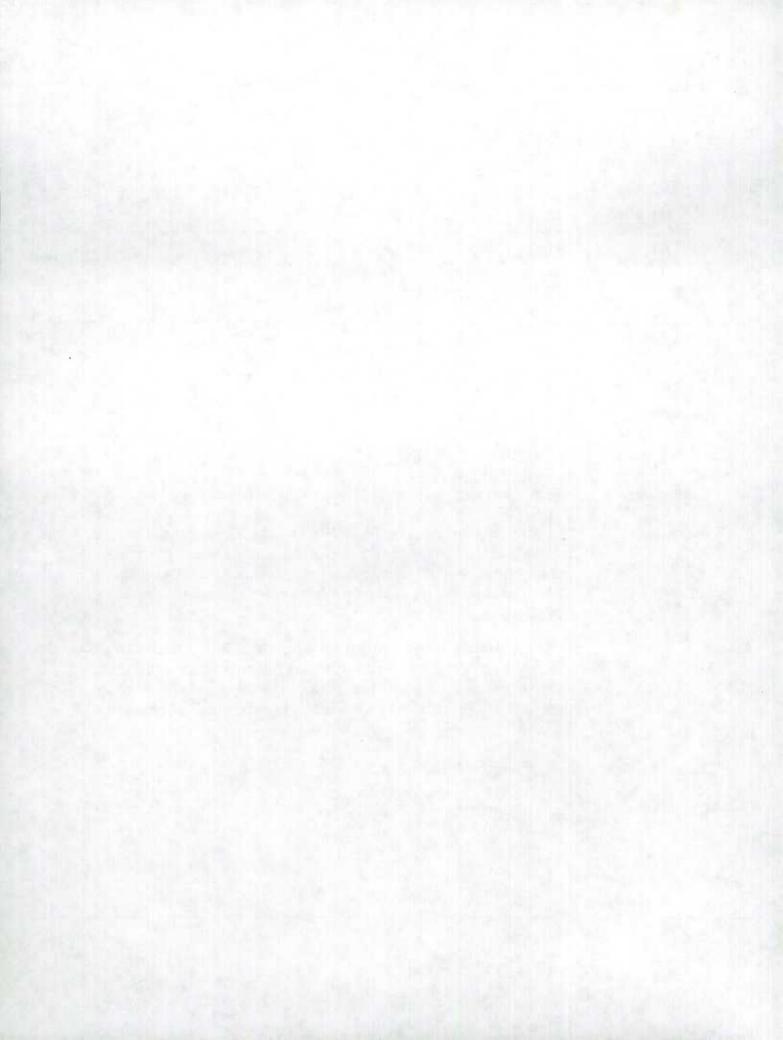
Household data are linked with income data from SCF and labour market and rent data from the LFS on a microdata file to produce distributions of housing characteristics and consumer goods by household income groups. The 1991 data will also be linked to data from the Shelter Cost

Project Manager: Penny Barclay (951-4634)

Survey.

Microdata: Yes Price No

X \$1,000.00



-	Statistics Statistique Canada Canada	CONFIDENTIAL when completed	FORM NO. HF 06
	1991 HOUSEHOLD FACIL	ITIES & EQUIPMENT SURVEY	Statistics Act, R.S.C. 1985,
	R O Docket No	Survey date Assign:	ment No. c. S19
1	2	3 1 4 11	5 Response Code
10.	DATE STRUCTURE ORIGINALLY BUILT	18. SUPPLEMENTARY HEATING EQUIPMENT	26. MICROWAVE OVEN
	Before 1941 1O	(excluding fireplace)	Yes 10 No 20
	1941 - 1950 20	Heating stove10	27. GAS BARBECUE
	1951 - 1960 3O	Cookstove or range 20	
	1961 - 1970 40	Other (Specify in NOTES) 40	Yes 10 No 20
	1971 - 1980 50	None 5○→ Go to 20.	28. NUMBER OF REFRIGERATORS
	1981 - 1985 60	19. FUEL FOR SUPPLEMENTARY	(If none enter 0)
	1986 - 1991	HEATING EQUIPMENT	
_	USE QUESTION CARD FOR 11	Oil or other liquid fuel 10	29. HOME FREEZER SEPARATE FROM REFRIGERATOR
11	IS THIS DWELLING IN NEED OF ANY	Gas 20 Electricity 30	Yes 10 No 20
	REPAIRS? (Do NOT include desirable	Wood4O	30. AUTOMATIC DISHWASHER
	remodelling, additions, conversions	Other (Specify in NOTES) 5O	Built-in
	or energy improvements).	20. HOME AIR CONDITIONING	Portable 2O
	Yes, MAJOR REPAIRS 10	Window type10	None 3O
	Yes, MINOR REPAIRS 20	Central unit 20	
	No, only REGULAR MAINTENANCE	None 3O	31. WASHING MACHINE
12.	TOTAL NUMBER OF ROOMS	21. TYPE OF WATER SUPPLY	Automatic washer
	(Including bedrooms)	Hot and cold	Other electric washer 30
13.	NUMBER OF BEDROOMS	running water 10	None
	(if none enter 0)	Cold running water only 20 Go to 23.	32. CLOTHES DRYER
	PRINCIPAL HEATING EQUIPMENT	No running water 3O	Electric10
		22. PRINCIPAL FUEL FOR PIPED HOT WATER SUPPLY	Gas 2O
	Steam or hot water furnace 10 Forced hot air furnace 20		None3O
		Oil or other liquid fuel 1 O Piped gas	TOTAL NUMBER OF:
		Bottled gas 30	(if none enter 0)
	-	Electricity	33. RADIOS
		Wood or other	
		(Specify in NOTES)	34. COLOUR TV SETS
	AGE OF PRINCIPAL HEATING EQUIPMENT	23. INSTALLED BATHTUB OR SHOWER	
	5 years or less10	in one bathroom 1O	35. BLACK AND WHITE TV SETS
	6 to 10 years 20	Bath facilities shared with	
	Over 10 years3O	another household 3O	36. VIDEO RECORDERS
16.	PRINCIPAL FUEL FOR THIS	No installed bathtub or shower 40	DOES THIS HOUSEHOLD HAVE THE FOLLOWING:
	HEATING EQUIPMENT	24. TOILET FACILITIES	Yes No
	Oil or other liquid fuel 10	One flush toilet 10	37. CABLE TELEVISION 10 20
-	Piped gas 20	Two flush toilets 2O Three or more flush toilets 3O	
. (Bottled gas	Chemical or other type 4O	38. COMPACT DISC PLAYER 10 20
1	Electricity 40	Toilet facilities shared with another household	39. CASSETTE PLAYER
1	Wood sold sold sold sold sold sold sold s	No installed toilet 60	OR TAPE RECORDER 10 20
(Other (Specify in NOTES) 60	25. FUEL FOR PRINCIPAL COOKING	
	DOES THIS HEATING EQUIPMENT HAVE ANY SPECIAL FEATURES?	EQUIPMENT	40. HOME COMPUTER 10 20
	Heat pump	Oil or other liquid fuel	TOTAL NUMBER OF: (if none enter 0)
		Piped gas 20 Bottled gas 30	
	Solar panels 20 Dual-fuel system (Specify) 30	Electricity 40	41. SMOKE DETECTORS (inside dwelling)
	Other (Specify) 40	Wood or other	42. PORTABLE FIRE
	No special features 50	(Specify in NOTES) 50 None 60	EXTINGUISHERS
			(inside dwelling)
	ES — See over for additional NOTES (llem no	
99		99 🗍 📗	
-			
00			

TOTAL NUMBER OF: (If none enter 0)	53. IS THE VACATION HOME IN
(Exclude those used for business)	Newfoundland 01O Manitoba 07O
43. OWNED AUTOMOBILES	Prince Edward Island 020 Saskatchewan 080
44. LEASED AUTOMOBILES	Nova Scotia 03O Alberta 08O
	New Brunswick 04O British Columbia 10O Quebec 05O N.W.T or Yukon 11O
45. OWNED VANS, TRUCKS	Ontario 06O Outside of Canada 12O
46. LEASED VANS, TRUCKS	54. IS THERE TELEPHONE SERVICE
(Include those used for business)	IN THE VACATION HOME? Yes 10 No 20
47. TELEPHONES (# "0", Go to 49)	55. GOLF EQUIPMENT Yes 10 No 20
48. TELEPHONE NUMBERS	56. WHEN DID (Heed of Household) MOVE INTO THIS DWELLING? Before 1986 1986 1987 1988 1989 1990 1991
49. INTERVIEWER CHECK ITEM:	Before 1986 1986 1987 1988 1989 1990 1991 10-> END 20 30 40 50 60 70
# "No" in item 42 on F03	57. DID (Head of Household) OWN OR RENT HIS/HER PREVIOUS DWELLING?
Otherwise (owners only) 20- Go to 50.	Owned
50. IS THIS DWELLING A CONDOMINIUM?	Rented 20
Yes 10 No 20	Did not maintain own dwelling 3O
51. IS THERE A MORTGAGE ON THIS DWELLING?	58. DID (Spouse of Head) OWN OR RENT HIS/HER PREVIOUS DWELLING?
Yes 10 No 20	(Mark "Not applicable" If no spouse) Owned
52. DOES ANYONE IN THIS HOUSEHOLD OWN A VACATION HOME?	Rented 20
Yes 10 No 20→ Go to 55.	Did not maintain own dwelling3O Not applicable4O
NOTES	
	99
	Nem no.
Nem no.	Rem no.
99	90
99 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	99 1 99 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
99	99 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	99
item no.	ttem no.
99	99
11em no.	99 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ttem no.	99
	Item no.
Rem no	Nem no
99	Canadä
	Calldud

Federation of Saskatchewan Indian Nations Housing Quality Survey



Survey Month: April-October 1991

Title: Federation of Saskatchewan Indian Nations Housing Quality Survey

Sponsor: Indian and Northern Affairs/Statistics Canada

Survey Method: Personal Interview

Sample Size: 8,600 dwellings (50,000 residents)

Objectives: The Saskatchewan Indian Housing Commission, a part of the Federation

of Saskatchewan Indian Nations (FSIN), requested help in planning and organizing a survey of housing needs on Saskatchewan Indian Reserves. The survey was in two parts: a supplement to the 1991 Census of Population on Saskatchewan Reserves, in which, for legal reasons, a limited number of Census questions were asked again of all households so that the responses could belong to the FSIN; and a survey of all dwellings on Reserves. The FSIN want the data in order to be able to demonstrate to INAC, and other agencies, the overall level of quality of the dwelling stock compared with accepted standards, and the level of crowding. As well, the data were designed to be usable by each Saskatchewan Indian Band as an aid in

administration of housing funds.

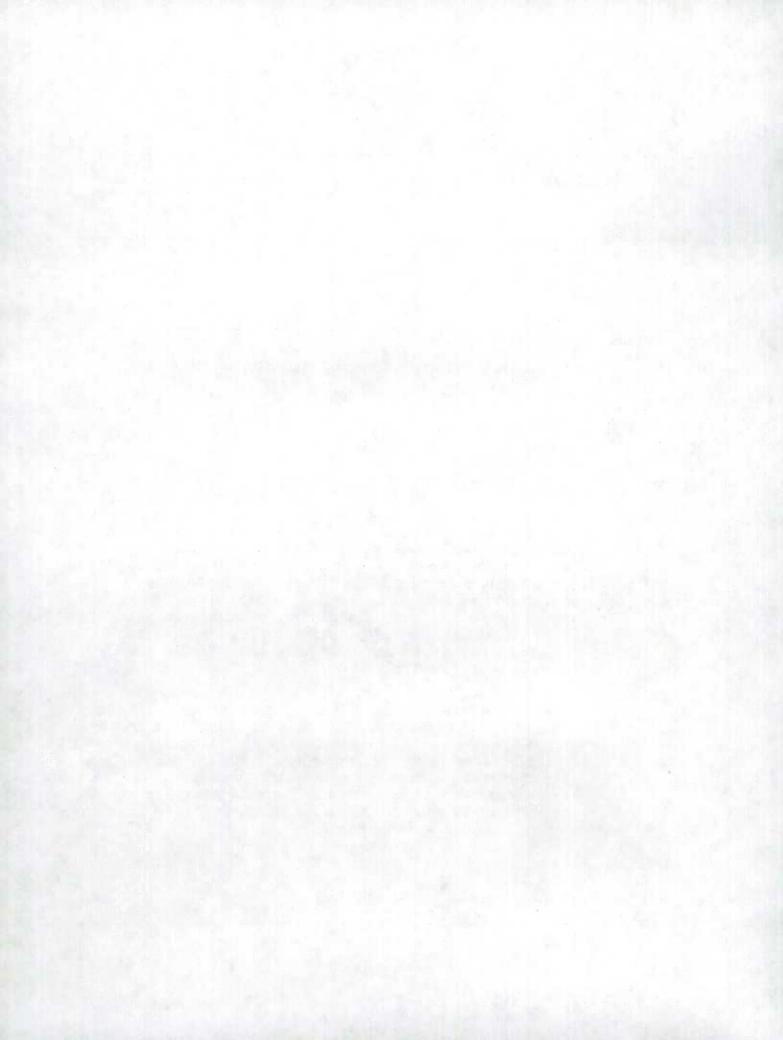
The Census supplement questionnaire (FSIN-1) was administered to each household by Statistics Canada's Census Representatives (i.e., Census interviewers) immediately after the Census during June 1991. Dwelling survey data collection (using questionnaire FSIN-2) was administered by the FSIN, between April and October 1991. The Special Surveys Group developed both questionnaires; produced questionnaire FSIN-1;

developed and administered training for the FSIN Survey Inspectors who administered questionnaire FSIN-2; and advised the FSIN on data capture,

processing, analysis and reporting.

Project Manager: Phil Stevens (951-9481)

Microdata: Data are available only from the FSIN



	Prov	FED No	EA No	VN	FORM FS	SIN-1
	Hhid No		Quest. N	0 0/		
					1 □ u0 3 □ oc	
1991 HOUSIN	IG NEEDS	ASSESS	MENT (HI	NA) QU	ESTIONNAIRE	FSIN USE ONLY



Federation of Saskatchewan Indian Nations

No and street or lot and conc	EGIN HERE Uprinting the address
	AST NO.
City, town, village, inclan rese	Province/territory
Postal code	Area code Telephone number
INTRODUCTION TO RESP	PONDENTS:
INTERVIEWER: show FSIN in	ntroductory letter
The Federation of Saskatche	twan indian Nations is carrying out a survey of housing serves. The information will be shared with your band government and will be kept confidential.
mees on Serketchewan Res	
veets on Seskatchewan Res council and with the federal would like to ask some por	estions about the house and the norsage in it for the
veeus on Seskatchewan Res council and with the fuderal would like to ask some que federation. The questions are isked, but the Statistics Act	estions about the house and the persons in it for the withe same as some of the Consus questions I've just tidoes not allow disclosure, so for least reasons I need
veets on Saskatchewan Res council and with the federal would like to ask some que federation. The questions an	estions about the house and the persons in it for the the same as some of the Census questions five just t does not allow disclosure, so for legal reasons I need ahead? to Question 1

1. NAME	PERSON 1	PERSON 2
Enter the names of all persons living here on June 4, 1991.	Given name int	
	₩ □ 4	× =
Enter name of PERSON 1	01	02.
2. How is this person related to		82 Husband/wife of Person
Mark one circle only.	or & PERSON 1	as Common-law partner of
If you mark the circle "Other", use the box provided		Person 1 04 Son/daughter of Person :
to indicate this person's relationship to Person 1.		06 O Son-in-law / daughter-in-law
Examples of "Other" persons related to Person 1:		Person 1 se- Grandchild el Person 1
grandlather/grandmother		67 O Father/mother of Person
• son's common-law partner • nephew/niece		06 Father-to-law / mother-in-law
Evamples of Without assessment to the		Person 1 De Brother/sister of Person 1
Examples of "Other" persons net related to Person 1: • lodger's husband/wife or common-law partner		10 Brother-en-law/sister-en-law
lodger's son/daughter room-mate's son/daughter		Person 1
• employee		11 C Lodger / boarder
		12 Room-mate
		10 C COM - Specify
3. What is this person's date of birth? Example:	Libertury Law	
If this person was born on the Day More Year	Day Month Year	Day Month Year
10th of February 1945, enter 10 02 1945		
If exact date is not known, enter best estimate.		
If born before June 4, 1976, mark "X" in the age box which is below each person's name.		
4. is this person male or female?	1 O Maie	1 O Made
	2 O Female	2 O Female
. (a) is this person a registered indian as defined by the	3 () No	• 0 =
Indian Act of Canada?	4 O Yes, registered Indian	3 Mo 4 Yes, registered Indian
(b) is this person a member of an Indian Band?	5 O Yes - Which one?	5 O Yes - Which one?
	Specify Indian Band or First Matton	Specify Indian Band or Fit Mattern
	● ○ No	■ ○ No
T 3 - Answer Questions 20 and 21 for each person age	d 15 and ever.	
2. Where did this person live 1 year ago, that is, on June 4, 1990?	1 Clived in the same house as now	1 Cived in the same house
Mark one circle only.	2 Clived in the same	as now 2 Uved in the same
	province/territory, but not in the same house	province/territory, but not in the same house
	Lived in a different province/territory in Canada	Lived in a different province/territory in Canada
	Print name of province/ territory.	Print name of province/
		termory.
	4 O Lived outside Canada	4 O I med cuenta Court
	Print name of country.	4 Lived outside Canada Print name of country.
Did this person live in this house 5 years ago, that is,		
on June 4. 1986?	5 O Yes	s ○ Yes
on some 4, 13001	€ ○ No	6 (No

PERSON 3	PERSON 4	PERSON 5	PERSON 6
Family name	Family name	Famey name	Family name
Given name Initial	Given name Initia	Given name initial	Given name instell
Age		→ ☐ Age	→ Age
03			
03	04	05	06.
04 Son/daughter of Person 1 05 Son-in-law/daughter-in-law of Person 1 06 Grandchild of Person 1 07 Father/mother of Person 1 08 Father-in-law/mother-in-law of Person 1 09 Brother/sister of Person 1 10 Brother-in-law/sister-in-law of Person 1 11 Lodger/boarder 12 Room-mate 13 Other — Specify	04 Son/daughter of Person 1 05 Son-in-law/daughter-in-law of Person 1 06 Granochild of Person 1 07 Father/mother of Person 1 08 Father-in-law/mother-in-law of Person 1 08 Brother/sister of Person 1 10 Brother-in-law/sister-in-law of Person 1 11 Lodger/boarder 12 Room-mate 13 Other — Specify	04 Son/daughter of Person 1 05 Son-in-law/daughter-in-law of Person 1 06 Grandchild of Person 1 07 Father/mother of Person 1 08 Father-in-law/mother-in-law of Person 1 09 Brother/sister of Person 1 10 Brother-in-law/sister-in-law of Person 1 11 Lodger/boarder 12 Room-mate 13 Other — Specify	04 Son/daughter of Person 1 06 Son-in-law / daughter-in-law of Person 1 06 Grandchild of Person 1 07 Father/mother of Person 1 08 Father-in-law/mother-in-law of Person 1 09 Brother-in-law/sister of Person 1 10 Brother-in-law/sister-in-law of Person 1 11 Lodger/boarder 12 Room-mate 13 Other — Specify
Day Month Year	Day Month Year	Omy Month Year	Dey Month Year
1 Male 2 Female	1 Maie 2 Female	1 Male 2 Formate	1 Nate 2 Fernale
3 No 4 Yes, registered Indian	3 No 4 Yes, registered Indian	a No 4 Yes, registered Indian	3 No 4 Yes, registered Indian
5 Yes — Which one? Specify Indian Band or First Nation 6 No	5 Yes - Which one? Specify Indian Band or First Nation No. No.	5 Yes — Which ene? Specify Indian Band or First Nation 8 No	5 Yes — Which one? Specify Indian Band or First Nation 6 No
ART 3 - Answer Questions	20 and 21 for each person ag	nd 15 and over.	
Lived in the same house as now Lived in the same province/termory, but not in the same house Lived in a different province/termory in Canada Print name of province/termory Lived butside Canada Print name of country.	1 Clived in the same house as now 2 Lived in the same province/territory, but not in the same house 3 Clived in a different province/territory in Canada Print name of province/territory. 4 Lived outside Canada Print name of country.	1	1 Lived in the same house as now 2 Lived in the same province/territory, but not in the same house 3 Lived in a different province/territory in Canada Print name of province/territory. 4 Lived outside Canada Print name of country.
5 Yes 6 No	5 Yes 6 No	5 Yes 6 No	5

PART 4 -	The following questions are about this dwelling.	
Н2.	(a) is this dwelling band housing, rented or ewned by you or a member of this household?	23 Sand housing 08 Owned 09 Rented
нз.	(a) How many rooms are there in this dwelling? Include kitchen, bedrooms and living-rooms. Do not count bathrooms, halls and attached sheds.	10 ◀ Number of rooms
	(b) How many of these rooms are bedrooms?	11 Number of bedrooms
H4.	When was this fwelling originally built? This means when it was completed, not the time of any remodelling, additions or conversions. If year is not known, get best estimate.	12
H5.	Would you say that this dwelling is in need of major repairs, minor repairs or only regular maintenance?	20 Only regular maintenance is needed (painting, chimney cleaning, window washing, etc.) 21 Milner repairs are needed (missing or loose floorboards, missing shingles, defective steps, railing or siding, etc.) 22 Major repairs are needed (structural repairs to walls, floors or ceilings, etc.)

PART 5 - INTERVIEWER: At end of interview, read the following to respondents:

Thank you for your cooperation. If the housing inspector hasn't already been here, a housing inspector for the Federation will come by to look at your house, with another questionnaire.

COMMENTS
[[[[[[[[[[[[[[[[[[[

Band Name	FORM FSIN-2		
Reserve Name and Number	1 Ottor 1 On	12	
FEDIEA	Census Hhid. No		
1 HOUSING NEEDS ASSESSMENT	(HNA) QUESTIONNAIRE	START TIME of inspection	
91 HOUSING NEEDS ASSESSMENT	(HIVA) QUESTIONNAINE	of inspec	



Federation of Saskatchewan Indian Nations

STEP 1: FSIN/Reserve dwelling number	
Owelling address or description of local	ation Apt or Unit #
orly, town, village, Indian reserve	Province Territory rea code Telsphone number Given Name
STEP 2: Mark all that apply 1 UD 2 DC	Final Status Code 5 Complete Inspection 6 Partial inspection 7 Refusal
3 Non-band housing 4 Write-off	8 Household absent for the survey period 9 No inspection - other reason
Federation is carrying out a surve Reserves. I'd like to get some inform will be shared with your band counc census enumerator was already hen	rom FSIN. As you may be aware, they of housing needs on Saskatchewaretion about your home. The informational with the federal government. If the some information was collected for the trator will be here later to collect information.

	neral Characteristics (from Band records where a		
1.	What was the year of construction?	Y	ear
	Answer obtained from	1 O Band	2O Household
2.	Have any additions or extensions been made to this dwelling? (Mark all that apply)	2O Kitchen	when was the last time? Yea When was the last time? Yea wom. When was the last time? Yea
		Family r	00m,
		4 O Bathroo	m(s)
		5 O Storage	When was the last time? Yea
		6 Other ac	dictions Sions
		7O No. non	
	Answers obtained from	8 Sand	9 O Household
3a.	Have there been any renovations or repairs done on this dwelling? 1 O Yes G 6 O No, none Answer obtained from 7 O Band 8	o to 3b	3b. 1) Total of the last job that was \$6000 or more When was the last time? Yea Answer obtained from 20 Band 30 Household 2) Total of the last job that was less then \$6000 \$
			When was the last time? Yea
			Answer obtained from 40 Band 50 Househol
4.	Has the dwelling ever received funds from (Yes	No Don't Know
	2) RRAP Program?	40	50 60
	Answer obtained from	7O Band	8O Household
5.	Main general water supply distribution.	1 O piped	Gc :c 5. next page
	(Mark one only)	2O fetched I	by household Go to 7, next page
		3O trucked t	o cistem Go to 9, next page

6.	(If piped) System: (Mark one only)	50 private	(serves 1 or 2 dwellings)				
	invarx one only)	6○ serves 3 or more dwellings, no treatment					
		70 serves	3 or more dwellings with chlori	ne treatment only			
		8 O serves treatme	3 or more dwellings with more nt	than chlorine			
7.	Source	1 O private	well (serves 1 or 2 dwellings)				
	(Mark one only)	2 Commu	nai well (serves 3 or more dwe	llings)			
		3O surface	water (lake, river, stream,)	Go to 10			
		4O stand pi	pe Go to 10				
		5 another	dwelling Go to 10				
8.	If a well, is it (This question requires observation)						
	1) properly capped?	Yes	No 2O				
	Iandscaped for proper drainage?						
			40				
	equipped with a working hand pump?	30	•••				
	Now go to 10						
9.	If a cistem, is it (This question requires observation)	Yes	No				
	1) property capped?	10	20				
			40				
	2) accessible?	30	40				
	accessible?		60				
10a.		50	60	20 Yes 30 No			
10a.	3) Isndscaped for proper drainage? (For all dwellings) Is water piped into the house?	50	10b. Is the water				
1 0a .	3) Isndscaped for proper drainage? (For all dwellings) Is water piped into the house?	5○ 1○ Yes →	10b. is the water system working?	30 No			
	3) Isndscaped for proper drainage? (For all dwellings) Is water piped into the house?	5○ 1○ Yes → 4○ No →	10b. Is the water system working? 10c. Is the lot serviced?	3 No No 5 Yes 6 No			
	3) landscaped for proper drainage? (For all dwellings) is water piped into the house? (This question requires observation)	5○ 1○ Yes → 4○ No →	10b. Is the water system working? 10c. Is the lot serviced? urce as general water supply	3 No No S No			
	3) landscaped for proper drainage? (For all dwellings) is water piped into the house? (This question requires observation)	5○ 1○ Yes → 4○ No → 7○ Same so	10b. Is the water system working? 10c. Is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			
	(For all dwellings) is water piped into the house? (This question requires observation) Drinking water.	5○ 1○ Yes → 4○ No → 7○ Same so 8○ Different	10b. Is the water system working? 10c. Is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			
11.	(For all dwellings) is water piped into the house? (This question requires observation) Drinking water.	5○ 1○ Yes → 4○ No → 7○ Same so 8○ Different	10b. is the water system working? 10c. is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			
11.	(For all dwellings) is water piped into the house? (This question requires observation) Drinking water.	5○ 1○ Yes → 4○ No → 7○ Same so 8○ Different	10b. is the water system working? 10c. is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			
11.	(For all dwellings) is water piped into the house? (This question requires observation) Drinking water.	5○ 1○ Yes → 4○ No → 7○ Same so 8○ Different 1○ surface w 2○ weil	10b. is the water system working? 10c. is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			
11.	(For all dwellings) is water piped into the house? (This question requires observation) Drinking water.	5○ 1○ Yes → 4○ No → 7○ Same so 8○ Different 1○ surface w 2○ weil 3○ piped	10b. is the water system working? 10c. is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			
11.	(For all dwellings) is water piped into the house? (This question requires observation) Drinking water.	5○ 1○ Yes → 4○ No → 7○ Same so 8○ Different 1○ surface w 2○ weil 3○ piped 4○ dugout	10b. is the water system working? 10c. is the lot serviced? urce as general water supply	3 No No 5 Yes 6 No			

13.	Type of sewage disposal	system in use. (M	lark one on	ly) 1 O Municipal Go	to 21, next t	page
	(Note: a municipal system mechanical treatment plant	takes the sewage		20 Shared (serves 2 or more households)		
	lagoon system. A shared	system takes the		c or more ha	xusenoids!	
	a small single-cell lagoon of jet system)	10 séwage mound	s or to a	3 O Individual		
14.	Is the lot serviced by a mu	inicipal system?	4O Yes			
			50 No			
Ques	stions 15 to 21 require obse	ervation				
15a.	Does the dwelling use a holding tank?	01 ○ Yes →	15b. is 1	the holding tank		
	floring talk:		1)	at least 3 feet from all buildings?	Yes . 02 〇	03 C
		12 O No	2)	at least 25 feet from wells and cisterns?	04 ()	05 (
			3)	properly capped?	06 🔾	07 🔾
			4)	landscaped for proper drainage?	08 🔾	09 🔾
			5)	accessible?	10 ()	11 0
	Does the dwelling use a	13 ○ Yes →	16b. is ti	he lagoon		
	lagoon?			at least 200 feet from the dwelling?	Yes 14 O	No 15 〇
		28 O No		with cleanouts every 50 feet?	16 🔾	17 ()
		28 O No	3)			17 ()
		28 O No	3)	50 feet?at least 1000 feet from	18 🔾	A I
		28 O No	3) 4) 5)	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 🔾	19 🔾
		28 O No	3) 4) 5)	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 0	19 0
		28 O No	3) 4) 5)	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O	19 🔾
		28 O No	3) 4) 5)	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O	190
	Does the dwelling use a jet system?	28 ○ No 01 ○ Yes →	3) 4) 5) 6) 7)	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O	190
	-		3) 4) 5) 6) 7) 17b. Is th	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O 25 O Yes	190
	-		3) 4) 5) 6) 7) 17b. ls th	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O 25 O Yes 02 O	19 O 21 O 23 O 25 O 27 O
	-	01 ○ Yes>	3) 4) 5) 6) 7) 17b. is th	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O 25 O Yes 02 O	19 O 21 O 23 O 25 O 27 O
	-	01 ○ Yes>	3) 4) 5) 6) 7) 17b. Is th	at least 1000 feet from other occupied dwellings? at least 1500 feet from surface water?	18 O 20 O 22 O 24 O 25 O Yes 02 O 04 O 06 O	19 O 21 O 23 O 25 O 27 O No 03 O

18a. Does the dwelling use a	11 ○ Yes →	18b. Is	the sewage mound		
sewage mound?		1)	at least 35 feet from all buildings?	Yes	No 13 ()
	20 O No	21			
	20 0 140	2)	at least 500 feet from surface water?	14.0	15 ()
				140	13 (
		3)	at least 50 feet from drifled wells?		
			GIHAG MORS I	16 ()	17 ()
		4)	at least 100 feet from		
			dug wells?	18 ()	19 🔾
19a. Does the dwelling use a tile field?	01 ○ Yes →	19b. is	the tile field		
		1)	at least 35 feet from	Yes	No
			all buildings?	02 ()	03 ()
	12 O No	2)	at least 50 feet from		
			drilled wells?	. 040	05 🔾
		3)	at least 100 feet from		
			dug wells?	. 06 〇	07 ()
		43	at least 5 feet from walks		
		- '	and driveways?	080	09 🔾
			et laant 500 faat too		
		3)	at least 500 feet from surface water?	10 ()	11 0
20a. Does the dwelling use a septic tank?	13 ○ Yes →	20b. is t	he septic tank		
		1)	at least 3 feet from all		No
			buildings?	14 ()	15 🔾
	26 O No	2)	at least 25 feet from		
			cisterns?	16 🔾	17 ()
		3)	at least 25 feet from		
			drilled wells?	18 🔾	19 🔾
		4)	at least 50 feet from		
			dug wells?	20 ()	21 0
		5)	properly capped?	22.0	200
				20	230
		6)	landscaped for proper drainage?	•••	
			and the same of th	240	25 ()
1a. (For all dwellings) Does the dwelling use a pit privy	10 Yes -> 2	21b. Is th	e pit privy (outhouse)		
(outhouse)?		1)	at least 50 feet from all	Yes	No
			twellings?	20	30
	80 No	2) 4	it least 100 feet from		
			vells?	40	50
		3) =	t least 100 feet from		
			urface water?	60	70
Non-the courses		-			
. Has the sewage system had the past year?	problems in 1	O Yes			

23.	This sewage system requires (Mark all that apply)	3O investigation by an EHO (possible water contamination)
		4O maintenance work (eg broken pump, missing lids)
		5 ○ no follow-up
24.	Garbage disposal. (Mark all that apply)	1 O community pick-up
	[venter of the treat edished)	2O taken to dump by a member of the household
		3 O private heap
		4O private pit
		5O burnt in barrel, can, drum
25.	Does the dwelling have a proper garbage container or stand?	6O Yes
	(that is, proof against rodents, dogs or weather)	7O No
	(This question requires observation)	

	Comme	ents		
			4	
				Цыя

- End of Part A -

	1) leaning?	Yes	02 ()		
			W O		
	2) bulging?		04 ()		
	3) bowed in?	05 🔿	06 🔾		
	4) separating?	07 ()	08 ()		
	5) with holes?	09 🔿	10 ()		
33.	The wall-surfaces of the outside are best	1 O Woo	d siding		
	(Mark one only)	2O Bride	veneer		
		3O Maso	onite/X-90		
		4O Stuce	00		
		50 Vinyl	metal		
		6O Plyw	ood only (incl. as	spenite, particle t	poard)
		7			
		8 Other			
4.	Are there any problems with the outside	1O Yes			
	wall surfaces?	20 No			
_		10.0			
5a.	Are there entrance steps?	3O Yes	→ 356.	Are any mis	sing or broken?
					4O Yes
		6O No			5 No
j.	Does the roof				
	1) sag?	Yes 01 O	No 02 O		
	2) bow?		MO		
	3) have holes?				
			06 ()		
	4) have missing starter strips?		08 🔾		
	5) have eavestroughing?	09 🔾	10 🔾		
	Does the roof have				
	1) curied shingles?	None	A few 20	Many 3O	Most 40
	2) missing shingles?	. 50	60	770	80
	Are the soffits or the fascia or the edge	1O Yes			
	of roof boards or sheathing loose, rotting or badly damaged?	20 No			

	39.	Are there air vents				
		1) in the soffits?	1O Yes			
			20 No			
			3 O Not applicable			
		2) on the roof?	40 Yes -	How Many? Number		
			50 No			
			6 O Not a	pplicable		
		3) in the gables?	70 Yes -	How Many? Number		
			8O No			
			9 Not a	pplicable		
	40.	Are any of the windows				
	70.	single-pane, without storm windows?	Yes	No 2O		
		2) broken?		40		
		3) not properly screened?		60		
		o, not proporty				
	41.	Are any window sashes or frames broken, rotting or badly damaged?	70 Yes -	How Many? Number		
			8O No			
	42.	is any of the caulking around the doors, windows and end mouldings in poor condition? (Mark one only)	1O All or	most in poor condition		
			2O Some in poor condition			
			3O All in	good condition		
	42	Are any of the outside doors		SOME STATE OF STATE O		
	43.		Yes	No 02 O		
				04 O		
				06 ()		
		4) with holes?		08 🔾		
		5) with broken hinges?		10 0		
		6) rotting?		12 O		
		7) without proper screening?	13 ()	14 ()		
	Inter	ior Characteristics.				
	44.	is there (Mark one only)	1 a full basement?			
			2○ a crawl space? Go to 54, next page 3○ other foundation? Go to 55, next page			
			4O no fo	undation? Go to 57, page 11		
	45.	(If full basement) Are there problems with the basement stairs (example: missing, broken, rotten steps)?	5 O Yes			
			6 O No			
			7 O No sta	airs Go to 47. next page		

46.	(If basement stairs) Do the basement stain					
	1) sufficient headroom (1.95 m.)	. 01 〇	No 02 ()			
	2) handrail on at least one side		04 O			
	3) stair width at least 860 mm					
47.						
41.	(If full basement) Does the basement have I (Note: rooms must be partitioned, and outside insulated. Exclude bathrooms, hallways, stora pantry, furnace room, workshop, and laundry in	oms Go to 53				
48.	Inside measurements of livable basement r					
40.	(Note: rooms must be partitioned, and outside	e walls insulate	d.			
	Exclude bathrooms, hallways, storage rooms, purpose formation for the following formation and formation for the formatio					
	Room 1: m. by	m. OR		Yes → 01 ○	No	
					02 🔾	
	Room 2: m. by	m. OR	sq. m.	→ 03 ○	04 🔾	
	Room 3: m. by	m. OR	sq. m.	→ o5 O	06 🔾	
	Room 4: m. by	m. OR]. sq. m.	→ 07 O	08 🔾	
	Room 5: m. by	m. OR	sq. m.	→ 09 ○	10 🔾	
50.	How many bedrooms have all walls a minimum of 2 metres long?	→ Bedro	oms			
51.	How many bedrooms have at least one window at least 380 mm. X 380 mm.?	→ Bedro	oms			
52.	Can all the bedroom windows be easily opened?(unobstructed and not requiring use of special tools or knowledge)	1 O Yes 2 O No 3 O No windo	ws in any of th	rese bedrooms		
53.	(For all dwellings) is there heaving or cracking	200				
		Yes	No			
	1) in the basement walls?	40	50			
	2) in the basement floor?	60	70			
54.	(If full basement or crawl space) Is there any sign of moisture or	10 Yes				
	water penetration? 2 O No					
55.	(If full basement, crawl space or other founds between the foundation and the living space	above insulate	ed?			
	1) Full insulation	Yes 1 O	No 2 ()	Can't tell		
	2) Perimeter insulation					
	-,		5 🔾	60		

	56.	Are the floor joists or beams above the foundation cracked, sagging or rotten?	1O Yes		
			2 O No 3 O Can't tell		
	57.	(All dwellings) Type of heater: (Mark one only for main. Mark all that apply for secondary.)	Main 01 O	Secondary 02 O Forced hot air furnace	
			03 ()	04 O Heating stove (include wood stove)	
			05 ()	06 O Radiant heaters (include baseboard heaters)	
			07 🔾	08 O Other electric heating (include space heaters)	
			09 🔾	10 O Cook stove	
			11 0	12 O Fire place	
			13 🔾	14 O Some other type	
			15 ()	16 O None	
	58.	Does the main heating unit have a CSA or ULC label stating specified clearance?	16 O Yes		
			17 O No		
			18 O Not ap	oplicable (example: fireplace)	
	59.	Do all the heating units meet clearance and installation standards? (instructions may be on a CSA or ULC label on the unit)	10 Yes		
			2O No		
			3O Can't	ell	
	60.	is there a make-up air duct or vent for the heating unit?	4O Yes		
			50 No		
	61.	is there an air-to-air heat exchanger or heat recovery ventilator?	6O Yes		
			70 No		
	62.	Does the heating system need an inspection by a qualified technician?	1 O Yes		
			20 No		
_	63.	Main type of heating fuel:	1 O Oil		
			2O Natural gas		
			3 O Propane		
			4 O Electric		
			5 ○ Wood		
			6O Other		
	64.	Does the dwelling have electric wiring?	7 O Yes		
			8 O No Go to 67, next page		

65.		welling has wiring) What is the	1 🔾 30 ai	mps or less	
		acity of the service, in amps? rk one only)	20 31 -	59 amps	
			3 🔾 60 ar	mps	
			40 61 -	70 amps	
			50 71 - 9	99 amps	
			60 100 8	amps	
			70 101 -	199 amps	
			8 O 200 a	amps or more	
66.	Are	there electrical problems like			
	1)	exposed wires?	Yes 01 O	No 02 〇	
	2)	old wiring?		04 ()	
	3)	inadequate insulation on the wires? .		06 🔾	
	4)	circuit-breakers tripping or fuses	07 🔾	08 🔾	
	5)	faulty outlets?		10 ()	
	6)	not enough electrical outlets?		12 0	
	7)	bathroom and outside electrical			
	•,	outlets not ground-fault-interrupted?	13 🔿	14 ()	
67.		(For all dwellings) is there running water in the kitchen or cooking area?		cold only	
		rk one only)	20 Yes.	hot and cold	
			30 No		
68.	Doe	s the dwelling have			
	1)	a flush toilet?	Yes _ 10	No 20	
	2)	a chemical toilet?	. 30	40	
	3)	a bathroom?	. 50	60	tt no bathroom go to 70, next
					page
69.		welling has a bathroom)	Vac	Yes not	
		s the bathroom have	Yes, useable	Yes, not useable	No
	1)	a bathtub with hot and cold water?		02 🔾	03 ()
	2)	a bathtub with cold water only?		05 🔾	06 🔾
	3)	a shower?	07 🔾	08 🔾	09 🔾
	4)	a sink with hot and cold water?	10 ()	11 ()	12 🔾
	5)	a sink with cold water only?	13 🔾	14 ()	15 🔾
	6)	a wall or ceiling fan?	16 🔾	17 ()	18 🔾
	7)	other ventilation?	19 🔾	20 🔾	21 🔾

70.	with the plumbing (anywhere in the	
	dwelling?) (Mark all that apply)	2 O Yes, other problems
		3 O No problems
		4 O No plumbing
71.	Does the dwelling have ventilation in the k	
	1) wall or ceiling fan	Yes No 10 20
	2) range hood	30 40
	3) air exhaust system	50
72.	(Ground level floor) inside measurements	
	(exclude bathrooms, hallways, storage roo laundry rooms).	oms, Is the room a bedroom?
		Yes No
	Room 1: m. by	_m. OR
	Room 2: m. by	m. OR sq. m. → 03 ○ 04 ○
	Room 3: m. by	m. OR sq. m. → o5 ○ o6 ○
	Room 4: m. by	m. OR
	Room 5: m. by	m. OR
	Room 6: m. by	m. OR
	Room 7: m. by	m. OR
	Room 8:m. by	Jm. OR
	Room 9: m. by	m. OR sq. m. → 17
	Room 10: m. by	m. ORsq. m. → 19 ○ 20 ○
73.	Are any of the rooms bedrooms?	1 O Yes Go to 74
		2O No Go to 77
74.	How many bedrooms have all walls a minimum of 2 metres long?	→ Bedrooms
75.	How many bedrooms have at least one window at least 380 mm. X 380 mm.?	→ Bedrooms
76.	Can all the bedroom windows be easily	1O Yes
	opened? (unobstructed and not requiring use of special tools or knowledge)	20 No
		3O No windows in any of these bedrooms
77.	(For all dwellings - Measure thickness	4 O 2 X 4?
	of wall using a door-frame) Are most exterior wall studs	5O 2 X 6?
		6O Other?
		7 Can't tell?
		8 O No exterior wall studs (eg. mobile home)

79.	(Upper level floor(s)) Inside measurer (exclude bathrooms, hallways, storage laundry rooms).	nents of livable u e rooms,	pper level rooms	is the room a bedroom?
	Room 1: m. by	m on		Yes No
			sq. m.	010 020
	Room 2:m. by	m. OR	sq. m. —	80 40
	Room 3: m. by	m. OR	sq. m. —	05 06 0
	Room 4: m. by	m. OR	sq. m.—	070 060
	Room 5: m. by	m. OR	sq. m. —	090 100
	Room 6: m. by	m. OR	sq. m. —	110 120
	Room 7:, m. by	m. OR	sq. m	130 140
	Room 8: m by	m. or	sq. m. —	150 160
	Room 9: m. by	m. or	sq. m. —	170 180
	Room 10: m. by	m. OR	sq. m.—	19 20 0
9 0.	Are any of the rooms bedrooms?	10 Yes 20 No		
31.	How many bedrooms have all walls a minimum of 2 metres long?	20 No		
	How many bedrooms have all walls a	2O No	Go to 84	
31.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one	2○ No Be	Go to 84 drooms	
11.	How many bedrooms have all waits a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring	2 ○ No Be 1 ○ Yes 2 ○ No	Go to 84 drooms	bedrooms
31.	How many bedrooms have all waits a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring	2O No Be 1O Yes 2O No 3O No win	drooms drooms dows in any of these	bedrooms
31.	How many bedrooms have all waits a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring use of special tools or knowledge)	2O No Be 1O Yes 2O No 3O No win terior walls is/are Yes	drooms drooms drooms	bedrooms
11.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requining use of special tools or knowledge) (For all dwellings) On the ceilings or interpretable of the ceilings of	2O No Be 1O Yes 2O No 3O No win terior walls is/are Yes 01 O	drooms drooms dows in any of these there any No 02 0 } # bo	bedrooms th "No", Go to 86, next page
31.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requining use of special tools or knowledge) (For all dwellings) On the ceilings or interest the second of the ceilings or interest.	2O No Be 1O Yes 2O No 3O No win terior walls is/are Yes 01 O	drooms drooms dows in any of these there any No	
31.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requining use of special tools or knowledge) (For all dwellings) On the ceilings or interpretable of the ceilings of	2 No Be 1 Yes 2 No 3 No win Rerior walls is/are Yes 01 O 03 O	drooms drooms	
11.	How many bedrooms have all waits a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring use of special tools or knowledge) (For all dwellings) On the ceilings or interpretable of the ceilings	2 O No Be 1 O Yes 2 O No 3 O No win terior walls is/are Yes 1 O Yes 2 O No 3 O No win 1 O O 1 Tooms? Yes	drooms drooms dows in any of these there any No 02 0 } # bo	
3. 4.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring use of special tools or knowledge) (For all dwellings) On the ceilings or integrated in the paint peeling? (If watermarks or paint peeling) in which	2O No Be 1O Yes 2O No 3O No win Rerior walls is/are Yes 03 O h rooms? Yes 05 O	drooms drooms drooms drooms dows in any of these there any No 02 O 04 O No	
3. 4.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring use of special tools or knowledge) (For all dwellings) On the ceilings or interpretation of the ceilings of the ceilings of the ceilings of the ceilings or interpretation of the ceilings	2 O No Be 1 O Yes 2 O No 3 O No win Perior walls is/are Yes 01 O h rooms? Yes 05 O 07 O	drooms drooms drooms drooms drooms drooms drooms drooms ho 02 O 04 O No 06 O 08 O	
3.	How many bedrooms have all waits a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring use of special tools or knowledge) (For all dwellings) On the ceilings or interpretation of the ceilings of the	2 O No Be 1 O Yes 2 O No 3 O No win terior walls is/are Yes 01 O n rooms? Yes 05 O 07 O 09 O	drooms drooms drooms drooms drooms drooms ho cos cos cos cos cos cos cos	
31.	How many bedrooms have all walls a minimum of 2 metres long? How many bedrooms have at least one window at least 380 mm. X 380 mm.?— Can all the bedroom windows be easily opened? (unobstructed and not requiring use of special tools or knowledge) (For all dwellings) On the ceilings or interpretation of the ceilings of the ceilings or interpretation of the ceilings of the ceil	2 O No Be 1 O Yes 2 O No 3 O No win 1 O Yes 2 O No 3 O No win 2 O No 3 O No win 2 O No 3 O No win 3 O No win 4 O O O O O O O O O O O O O O O O O O	drooms drooms drooms drooms drooms drooms drooms drooms ho 02 O 04 O No 06 O 08 O	

86.	(For all dwellings) Do any interior walls ha	ve large crack	s (at least	1/4-inch wide)?
	1) In corners of walls?	. 10	20	
	2) Between ceiling and walls?	30	40	
	3) Anywhere else?	50	60	
87.	Are any interior doors to bedrooms or bathrooms missing or broken?	7O Yes		
	bathrooms missing or broken?	80 No		
88.	Are there any problems with the floor(s)?	10 Yes		
		20 No		
89.	Are there any problems with the floor covering(s)?	3O Yes		FED FINE DISTRICT
	covering(s) ?	40 No		
90a.	Does the dwelling have	SALT		
1)	a smoke detector?	50 Yes-		90b. (If yes)
		60 No		How many? →
				How many are working?
2)	a fire extinguisher?	70 Yes —		90c. (If yes)
		8O No		How many? →
				How many are working?
91.	Is there an accessible attic?	10 Yes		
		2O No. not	accessible.	Go to 94
		3O No attic	Go to 94	
92.	is the attic hatch insulated?	1O Yes		
		20 No		
93a.	is there any damage in the attic due to	3○ Yes→		yes) Why? 5O poor ventilation
	condensation, moisture or water penetration?	40 No	app	ark all that bly) 60 leaks in roof
				7 Oother
94.	(For all dwellings) Does the ceiling have			
	1) a vapour barrier?	1O Yes		
		20 No		
		3O Can't tell		
15.5	2) insulation?	40 Yes. pan	tial	
		5 O Yes, con	plete	
		60 No G	o to 97. nex	n page
		7 Can't tell	Gama	7. next page

2 blown fibreglass 3 cellulose 4 rock wool 5 another type 10 less than 3 inches 2 3 - 6 inches 3 7 - 12 inches 4 more than 12 inches 5 can't tell 17. (For all dwellings) Type of dwelling: 18 01 Bungalow 19 04 Row 19 05 Bi-level 10 Duplex 10 Other	33.	(If ceiling is insulated) Types of insulatio (Mark all that apply)	n: 10 fibreglass batts		
4 or rock wool 5 on another type 10. Depth of most of the insulation: (Mark one only) 1 oless than 3 inches 2 oless than 3 inches 3 or 12 inches 4 or more than 12 inches 5 or can't tell 17. (For all dwellings) Type of dwelling: 18. Use of the insulation: 19. (For all dwellings) Type of dwelling: 19. (For all dwellings) Type of dwelling: 19. (For all dwellings) Type of dwelling: 10. Oless than 3 inches 2 oless than 3 inches 3 or 12 inches 4 or more than 12 inches 5 or can't tell 10. Spirt-level 10. Spirt-level 10. Spirt-level 10. Oless than 3 inches 10. Triples 10. Only regular maintenance 10. Other 10. Other 11. Only regular maintenance (painting, chimney cleaning, windowr washing, etc.) 12. Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 13. Major repairs (structural repairs to walls, floors or ceilings, etc.) 14. Write off the dwelling		· · · · · · · · · · · · · · · · · · ·	2 blown fibreglass		
96. Depth of most of the insulation: 1 less than 3 inches 2 3 - 6 inches 3 7 - 12 inches 4 more than 12 inches 5 can't tell 97. (For all dwellings) Type of dwelling: 01 Bungalow 02 Fourplex 03 Split-level 04 Row 05 Bi-level 06 Semi-detached 07 Duplex 08 Mobile home 09 Triplex 10 Only regular maintenance (peinting, chimney cleaning, window washing, etc.) 10 Major repairs (structural repairs to walts, floors or ceilings, etc.) 4 Write off the dwelling			3 Collulose		
96. Depth of most of the insulation: (Mark one only) 1 less than 3 inches 2 3 - 6 inches 3 7 - 12 inches 4 more than 12 inches 5 can't tell 97. (For all dwellings) Type of dwelling: 01 Bungalow 02 Fourplex 03 Spirt-level 04 Row 05 Bi-level 06 Semi-detached 07 Duplex 08 Mobile home 08 Triplex 10 Other 10 Only regular maintenance, minor repeirs, major repeirs or is a write-off? (Mark one only) 1 Only regular maintenance (peinting, chimney cleaning, window washing, etc.) 2 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 3 Major repairs (structural repairs to walts, floors or ceilings, etc.)			4 O rock wool		
(Mark one only) 2 3 - 6 inches 3 7 - 12 inches 4 more than 12 inches 5 can't tell 97. (For all dwellings) Type of dwelling: 01 Bungalow 02 Fourplex 03 Split-level 04 Row 05 Bi-level 06 Semi-detached 07 Duplex 08 Mobile home 09 Triplex 10 Other 10 Only regular maintenance, minor repairs, major repairs or is a write-off? (Mark one only) 10 Major repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 3 Major repairs (structural repairs to walls, floors or ceilings, etc.)			5 another type		
2 3 - 6 inches 3 7 - 12 inches 4 more than 12 inches 5 can't tell 97. (For all dwellings) Type of dwelling: 01 Bungalow 02 Fourplex 03 Spirt-level 04 Row 05 Bi-level 06 Semi-detached 07 Duplex 08 Mobile home 08 Triplex 10 Other 10 Other 10 Only regular maintenance (peinting, chimney cleaning, window washing, etc.) 2 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 3 Major repairs (structural repairs to walls, floors or collings, etc.)	96.		1 O less than 3 inches		
97. (For all dwellings) Type of dwelling: 01		(warn one only)	2 3 - 6 inches		
97. (For all dwellings) Type of dwelling: 01			3 7 - 12 inches		
97. (For all dwellings) Type of dwelling: 01			40 more than 12 inches		
03 Split-level 04 Row 05 Bi-level 06 Semi-detached 07 Duplex 08 Mobile home 08 Triplex 10 Other 10 Only regular maintenance (painting, chimney cleaning, window washing, etc.) 11 Only regular maintenance (painting, chimney cleaning, window washing, etc.) 22 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 33 Major repairs (structural repairs to walts, floors or ceilings, etc.) 44 Write off the dwelling			5O can't tell		
05 © Bi-level 06 © Semi-detached 07 © Duplex 08 © Mobile home 08 © Triplex 10 © Other 10 Only regular maintenance, minor repeirs, major repeirs or is a write-off? (Mark one only) 10 Only regular maintenance (peinting, chimney cleaning, window washing, etc.) 20 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 30 Major repairs (structural repairs to walls, floors or ceilings, etc.)	97.	(For all dwellings) Type of dwelling:	01 O Bungalow	02 O Fourplex	
8. Would you say this dwelling is in need of only regular maintenance, minor repairs, major repairs or is a write-off? (Mark one only) 10 Only regular maintenance (peinting, chimney cleaning, window washing, etc.) 20 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 30 Major repairs (structural repairs to walls, floors or ceilings, etc.) 40 Write off the dwelling			03 O Spirt-level	04 O Row	
Would you say this dwelling is in need of only regular maintenance (painting, chimney cleaning, major repairs or is a write-off? (Mark one only) Only regular maintenance (painting, chimney cleaning, window washing, etc.) Minor repairs (missing or loose floorboards, missing shingles, detective railing or siding, etc.) Major repairs (structural repairs to walls, floors or ceilings, etc.) Write off the dwelling			05 O Bi-level	06 O Semi-detached	
Would you say this dwelling is in need of only regular maintenance (painting, chimney cleaning, window washing, etc.) 1 Only regular maintenance (painting, chimney cleaning, window washing, etc.) 2 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 3 Major repairs (structural repairs to walls, floors or ceilings, etc.) 4 Write off the dwelling			07 O Duplex	08 O Mobile home	
only regular maintenance, minor repairs, major repairs or is a write-off? (Mark one only) 2 Minor repairs (missing or loose floorboards, missing shingles, defective railing or siding, etc.) 3 Major repairs (structural repairs to walls, floors or ceilings, etc.) 4 Write off the dwelling			00 O Triplex	10 Other	
	98.	only regular maintenance, minor repairs, major repairs or is a write-off?	window washing, etc.) 2 Minor repairs (missing or loose floorboards, missing shingles, detective railing or siding, etc.) 3 Major repairs (structural repairs to walls, floors or		

Survey on Ageing and Independence



Survey Month:

August 1991

Title:

Survey on Ageing and Independence

Sponsor:

Health and Welfare Canada

Survey Method:

Telephone Interview

Sample Size:

25,000 respondents aged 45 and over

Objectives:

The Survey on Ageing and Independence was developed to measure a wide range of characteristics on today's seniors (65 years of age or over) and on tomorrow's seniors (45-64 years of age). The information gathered relate to factors important to remain independent as one ages. Specifically, the survey questionnaire gathered basic information on characteristics and indicators such as:

- retirement and main activity,

- labour characteristics and retirement preparation,

- physical and social activities,

well-being,social support,

- mobility,

accidents and safety,housing characteristics,

income and financial security.

Project Manager:

Gilles Montigny (951-9731)

Microdata:

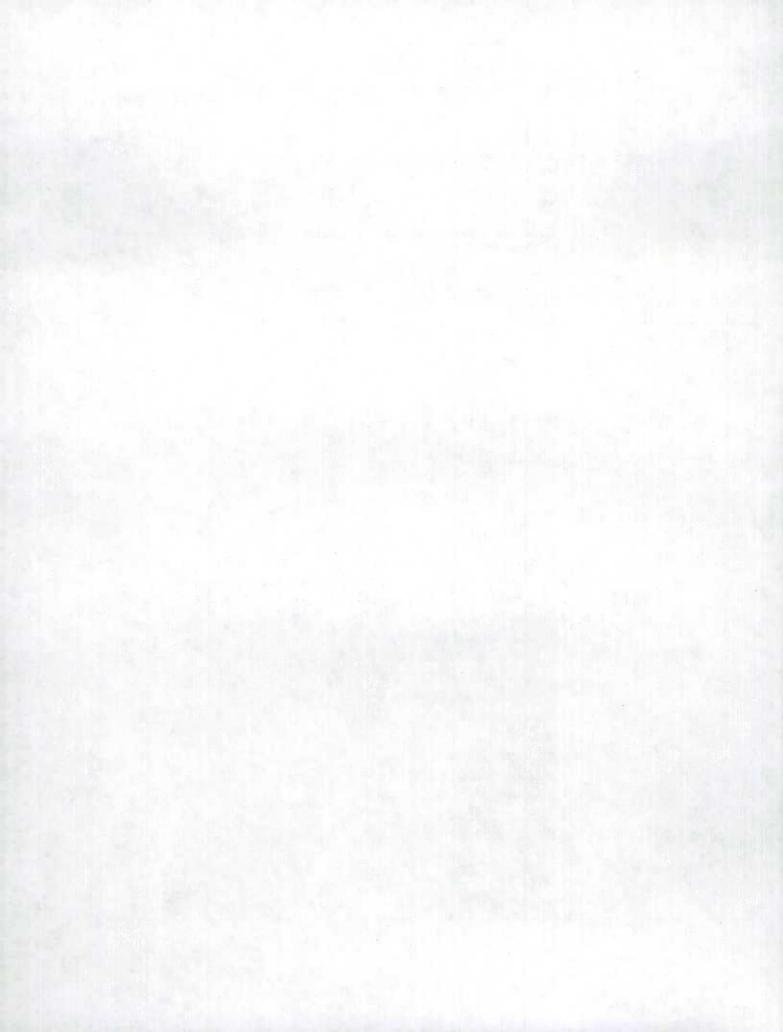
Yes

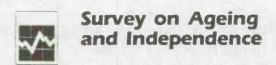
Price

No

X

\$500.00





Copie française disponible.

Collected under the authority of Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

Confidential when completed.

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5: [] [] [] [] [] [] [] [] [] [
8.	
10:	
11: 12:	

Time period	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
09:00 - 12:00						
12:01 - 16:00						
16:01 - 19:00						
19:01 – 21:00						

	Language of Interview	Final Status Code	Start time	Finish time
¹ O Phone Interview	3 O English			
² O Personal Interview	4 O French			

Introduction	(1) 18-14 (THE BELLINGTH-1) (BELLINGTH-1) (BELLINGTH-1) (BELLINGTH-1) (BELLINGTH-1) (BELLINGTH-1) (BELLINGTH-1)
retirement or pre-retire Canada's population	from Statistics Canada. I'm calling to complete a questionnaire on your ement plans, your health and lifestyle. By the year 2000, close to one third of will be over 45 years of age. Your answers will provide information to policy and or today's seniors and the seniors of tomorrow.
All the information we	collect in this survey will be kept confidential.
I would like to begin b	y asking you some questions about yourself.

A.1	What is your current marital status? Are you	A.3	What is the date of your birth?
	1 Married or living common-law?		6 7 8
	² O Separated?		Day Month Year
	³ O Divorced?	A.4	Interviewer check item:
	4 O Widowed?		September 1926 ▶ Go to A.31 (page 4)
	5 ○ Single (never married)? ▶ Go to A.3		2 ○ If born after September 1926 ▶ Go to A.5 3 ○ If born in September 1926, ask respondent:
A.2	(See A.1) How long have you been?		Are you now 65 years of age?
	Years (if less than a year, enter 01)		4 ○ Yes ▶ Go to A.31 (page 4) 5 ○ No ▶ Go to A.5

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2 -

Weeks worked A.7 Interviewer check item: 1 ○ If 00 weeks worked reported in A.6 is 0 to A.12 2 ○ Otherwise is Go to A.8 A.8 During those weeks, was the work mostly full-time, that is 30 hours or more per week; or partitime, that is 16 so to A.12 A.13 ○ Of the activities just mentioned, what is less than 30 hours per week? 3 ○ Full-time workers A.9 Which of the following are major activities in your life at this time? (Mark all that apply) 1 ○ Working for pay or profit? 2 ○ Managing a home or being a homemaker? 3 ○ Taking care of a family member or close friend? 4 ○ Doing volunteer work? 5 ○ Something else? Managing a home or being a homemaker? 5 ○ Doing volunteer work or the following are major activities in your life at this time? (Mark all that apply) 1 ○ Working for pay or profit? 2 ○ Managing a home or being a homemaker? 5 ○ Doing volunteer work 6 ○ Something else? A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No is Go to A.16 A.15 Or the activities just mentioned, what best describes the main thing you currently do? A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No is Go to A.16 A.15 Do you consider yourself to be retired? 4 ○ Yes is Go to SECTION B (page 5) 5 ○ No A.16 At what age do you expect to retire? Age is Go to SECTION C (page 7) CR 70 ○ Don't know is Go to C.2 part b. (page 7) 70 ○ Don't know is Go to C.2 part b. (page 7) 70 ○ Don't expect to retire? is Go to SECTION D	Res	pondents under 65 years		THE REPORT OF THE PARTY AND ADDRESS.
Iffe at this time? (Mark all that apply)	A.5			
A5 During the past twelve months, that is since September 1990, how many weeks did you work at any job or business? Include time for vacation, illness, strikes or lockouts. Weeks worked Weeks worked reported in A5 ≥ Go to A.12		· ·	A.12	life at this time? (Mark all that apply)
Weeks worked A7 Interviewer check item: 1	A.6	September 1990, how many weeks did you work at any job or business? Include time for		Working for pay or profit? Managing a home or being a homemaker?
A.7 Interviewer check item: 1				or close friend?
2 ○ Otherwise ▶ Go to A.8 A.8 During those weeks, was the work mostly full-time, that is 30 hours or more per week? 3 ○ Full-time 4 ○ Part-time ▶ Go to A.12 Full-time workers A.9 Which of the following are major activities in your life at this time? (Mark all that apply) 1 ○ Working for pay or profit? 2 ○ Managing a home or being a homemaker? 3 ○ Taking care of a family member or close friend? 4 ○ Doing volunteer work? 5 ○ Something else? Interviewer: if only one activity marked, go to A.14 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit and managing a home or being a homemaker? 3 ○ Something else? Interviewer: if only one activity marked, go to A.14 A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No ▶ Go to A.16 3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 A.15 Do you consider yourself to be retired? 4 ○ Yes ▶ Go to SECTION C (page 7) OR 30 ○ Don't know ▶ Go to C.2 part b. (page 7) 70 ○ Don't know ▶ Go to C.2 part b. (page 7) 70 ○ Don't expect to retire ▶ Go to SECTION D	A.7			
A.8 During those weeks, was the work mostly full-time, that is 190 hours or more per week? 3 ○ Full-time 4 ○ Part-time ▶ Go to A.12 Full-time workers A.9 Which of the following are major activities in your life at this time? (Mark all that apply) 1 ○ Working for pay or profit? 2 ○ Managing a home or being a homemaker? 3 ○ Taking care of a family member or close friend? 4 ○ Doing volunteer work? 5 ○ Something else? Interviewer: if only one activity marked, go to A.11 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit and managing a home activities in your life at this time? 4 ○ Doing volunteer work? 5 ○ Something else? Interviewer: if only one activity marked, go to A.11 A.11 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit in your life and managing a home or being a homemaker 3 ○ Doing volunteer work 5 ○ Something else A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 3 ○ Don't know ▶ Go to SECTION C (page 7) OR 30 ○ Don't expect to retire ▶ Go to SECTION D A16 At what age do you expect to retire? 6 ○ A17 Age ▶ Go to SECTION C (page 7) OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D		1 ○ If 00 weeks worked reported in A.6 ▶ Go to A.12		5 O Something else?
time, that is 30 hours or more per week, or partitime, that is sess than 30 hours per week? 3 Full-time 4 Part-time > Go to A.12 Full-time workers A.13 Of the activities just mentioned, what I describes the main thing you currently do? (Mark one only) 1 Working for pay or profit? 2 Managing a home or being a homemaker? 3 Taking care of a family member or close friend? 4 Doing volunteer work? 5 Something else? Interviewer: if only one activity marked, go to A.11 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 Working for pay or profit and managing a home above the main thing you currently do? (Mark one only) 1 Working for pay or profit 2 No > Go to A.16 A.11 At what age do you expect to retire? A.12 At what age do you expect to retire? A.13 Of the activities just mentioned, what idescribes the main thing you currently do? (Mark one only) 1 Working for pay or profit 2 No > Go to A.16 3 Don't know > Go to A.16 3 Don't know > Go to SECTION C (page 7) OR 801 O Don't know > Go to C.2 part b. (page 7) 802 O Don't expect to retire > Go to SECTION D		2 Otherwise ▶ Go to A.8		Interviewer: if only one activity marked, go to A.14
time, that is less than 30 hours per week? 3	A.8			
## Which of the following are major activities in your life at this time? (Mark all that apply) 1		time, that is less than 30 hours per week?	A.13	describes the main thing you currently do?
A.9 Which of the following are major activities in your life at this time? (Mark all that apply) 1 Working for pay or profit? 2 Managing a home or being a homemaker? 3 Taking care of a family member or close friend? 4 Doing volunteer work? 5 Something else? Interviewer: if only one activity marked, go to A.11 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 Working for pay or profit 2 Managing a home or being a homemaker 3 Working for pay or profit and managing a home 4 Taking care of a family member or close friend 5 Doing volunteer work 6 Something else A.14 Have you permanently stopped working full-ifor pay or profit? 1 Yes 2 No Go to A.16 3 Don't know Go to A.16 3 Don't know Go to SECTION B (page 5) 5 No A.15 At what age do you expect to retire? Age Go to SECTION C (page 7) OR 801 Don't know Go to C.2 part b. (page 7) 802 Don't expect to retire Go to SECTION D		4 ○ Part-time ▶ Go to A.12		1 O Working for pay or profit
Working for pay or profit?	Fuil	-time workers		² O Managing a home or being a homemaker
2	A.9			³ O Working for pay or profit <u>and</u> managing a home
2		1 O Working for pay or profit?		
3 ○ Taking care of a family member or close friend? 4 ○ Doing volunteer work? 5 ○ Something else? Interviewer: if only one activity marked, go to A.11 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit 2 ○ Managing a home or being a homemaker 3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ Doing volunteer work 6 ○ Something else A.15 Do you consider yourself to be retired? 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ No A.16 At what age do you expect to retire? 5 ○ No OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D		2 Managing a home or being a homemaker?		1 aking care of a family member or close mend
4 ○ Doing volunteer work? 5 ○ Something else? Interviewer: if only one activity marked, go to A.11 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit 2 ○ Managing a home or being a homemaker 3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.11 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D A.14 Have you permanently stopped working full-for pay or profit? 1 ○ Yes 2 ○ No ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 A.15 Do you consider yourself to be retired? 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ No A.16 At what age do you expect to retire? 6 ○ OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D		3 O Taking care of a family member		5 O Doing volunteer work
Interviewer: if only one activity marked, go to A.11 A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 Working for pay or profit 2 Managing a home or being a homemaker 3 Working for pay or profit and managing a home 4 Taking care of a family member or close friend 5 Doing volunteer work 6 Something else A.11 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 Don't know ▶ Go to C.2 part b. (page 7) 802 Don't expect to retire ▶ Go to SECTION D A.11 At what age do you'expect to retire ▶ Go to SECTION D A.12 At what age do you expect to retire ▶ Go to SECTION D A.13 At what age do you expect to retire ▶ Go to SECTION D A.14 Have you permanently stopped working tultifor pay or profit? 1 Yes 2 No ▶ Go to A.16 3 Don't know ▶ Go to A.16 3 Do you consider yourself to be retired? 4 Yes ▶ Go to SECTION B (page 5) 5 No A.16 At what age do you expect to retire? 6 Age ▶ Go to SECTION C (page 7) OR 701 Don't know ▶ Go to C.2 part b. (page 7) 702 Don't expect to retire ▶ Go to SECTION D		4 O Doing volunteer work?		6 O Something else
A.10 Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit 2 ○ Managing a home or being a homemaker 3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.11 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D 1 ○ Yes 2 ○ No ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ No A.15 At what age do you expect to retire? 6 ○ A.16 A 16 At what age do you expect to retire? 6 ○ OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D			A.14	
describes the main thing you currently do? (Mark one only) 1 ○ Working for pay or profit 2 ○ Managing a home or being a homemaker 3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.16 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D 2 ○ No ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 3 ○ Don't know ▶ Go to A.16 A.15 Do you consider yourself to be retired? 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ No A.16 At what age do you expect to retire? 6 ○ □ Age ▶ Go to SECTION C (page 7) OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D				¹ O Yes
2 ○ Managing a home or being a homemaker 3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.16 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D A.15 Do you consider yourself to be retired? 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ No A.16 At what age do you expect to retire? 6 ○ □ □ Age ▶ Go to SECTION C (page 7) OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D	A.10	describes the main thing you currently do?		2 ○ No ▶ Go to A.16
3 ○ Working for pay or profit and managing a home 4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.16 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D A.15 Do you consider yourself to be retired? A.16 At what age do you expect to retire? A.16 At what age do you expect to retire? OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D		1 O Working for pay or profit		3 ○ Don't know ▶ Go to A.16
4 ○ Taking care of a family member or close friend 5 ○ Doing volunteer work 6 ○ Something else A.11 At what age do you expect to retire? 7 ○ □ Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D 4 ○ Yes ▶ Go to SECTION B (page 5) 5 ○ No A.16 At what age do you expect to retire? 6 □ □ Age ▶ Go to SECTION C (page 7) OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D		² Managing a home or being a homemaker		
Something else A.11 At what age do you expect to retire? A.16 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D A 16 At what age do you expect to retire? Age ▶ Go to SECTION C (page 7) OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D		³ O Working for pay or profit <u>and</u> managing a home	A.15	Do you consider yourself to be retired?
5 O Doing volunteer work 6 O Something else A.11 At what age do you expect to retire? A.16 At what age do you expect to retire? Age Go to SECTION C (page 7) OR 801 O Don't know Go to C.2 part b. (page 7) 802 O Don't expect to retire Go to SECTION D OR 701 O Don't expect to retire Go to SECTION D		4 O Taking care of a family member or close friend		4 ○ Yes ▶ Go to SECTION B (page 5)
A.11 At what age do you expect to retire? A.16 At what age do you expect to retire?		5 O Doing volunteer work		
Age Go to SECTION C (page 7) OR 801 O Don't know Go to C.2 part b. (page 7) 802 O Don't expect to retire Go to SECTION D Go to SECTION D Age Go to SECTION C (page 7) OR 701 O Don't know Go to C.2 part b. (page 7) 702 O Don't expect to retire Go to SECTION D		6 O Something else		0 140
OR 801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D OR 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D	A.11	At what age do you expect to retire?	A.16	At what age do you expect to retire?
801 ○ Don't know ▶ Go to C.2 part b. (page 7) 802 ○ Don't expect to retire ▶ Go to SECTION D 701 ○ Don't know ▶ Go to C.2 part b. (page 7) 702 ○ Don't expect to retire ▶ Go to SECTION D		Age ▶ Go to SECTION C (page 7)		Age ▶ Go to SECTION C (page 7)
802 ○ Don't expect to retire ▶ Go to SECTION D 702 ○ Don't expect to retire ▶ Go to SECTION D		OR		OR
		801 ○ Don't know ▶ Go to C.2 part b. (page 7)		701 ○ Don't know ▶ Go to C.2 part b. (page 7)
(page 6) (page 6)		802 O Don't expect to retire Go to SECTION D (page 8)		702 O Don't expect to retire Go to SECTION D (page 8)

Non-workers	Non-workers - Not looking for work
A.17 Are you currently looking for work?	A.23 Which of the following are major activities in you life at this time? (Mark all that apply)
¹ O Yes	¹ Managing a home or being a homemaker?
² ○ No ▶ Go to A.23	² Taking care of a family member or close friend?
Non-workers - Looking for work	³ ○ Doing volunteer work?
A.18 Which of the following are major actilife at this time? (Mark all that apply)	
3 C Looking for work?	Interviewer: if only one activity marked, go to A.25
Managing a home or being a ho Taking care of a family member or close friend?	A.24 Of the activities just mentioned, what besi describes the main thing you currently do? (Mark one only)
6 O Doing volunteer work?	5 Managing a home or being a homemaker
	6 Taking care of a family member or close friend
7 O Something else?	⁷ O Doing volunteer work
Interviewer: if only one activity marked, g	go to A.20 8 Something else
A.19 Of the activities just mentioned, describes the main thing you current (Mark one only)	what best A.25 Did you ever work full-time for pay or profit, that y do? 1 O Yes
1 O Looking for work	2 ○ No ▶ Go to SECTION D (page 8)
² Managing a home or being a home	A.26 in what year did you last have a paid job or
3 O Taking care of a family member or	close friend operate a business or farm?
4 O Doing volunteer work	Year
5 O Something else	A.27 Have you permanently stopped working full-time for pay or profit?
A.20 Are you looking for full-time work, hours or more per week, or part-time than 30 hours per week?	that is, 30
6 ○ Full-time ▶ Go to A.22	5 ○ Don't know ▶ Go to C.2 part b. (page 7)
⁷ O Part-time	A.28 Are you permanently unable to work because of a
8 ○ Both ▶ Go to A.22	disability?
A21 Have you permanently stopped work	
for pay or profit? ¹ ○ Yes ▶ Go to SECTION B (page 5)	A.29 Did you ever retire from a job or business? Exclude lay-offs, quitting, or stopping work to
2 () No	have a family. 1 ○ Yes ▶ Go to SECTION B (page 5)
3 O Don't know	2 ○ No ▶ Go to SECTION D (page 8)
A.22 At what age do you expect to retire?	A.30 At what age do you expect to retire?
Age ▶ Go to SECTION C (pa	3
OR	OR
501 ○ Don't know ▶ Go to C.2 part b. (pa	age 7) 401 ○ Don't know ▶ Go to C.2 part b. (page 7)
502 O Don't expect to retire > Go to SEC (page 8)	

Nev	ver worked	SECTION B. Retirement					
A.43	Are you permanently unable to work because of a disability?	Now	I have some questions about you	r retirem	nent.		
	¹ O Yes	8.1	What was your age when you ret (If respondent retired more than retirement)	ired?	use last		
	2 O No		Age at retirement				
A.44	Which of the following are major activities in your life at this time? (Mark all that apply)		OR 401 O Didn't retire > Go to SECTIO	IN D (02	20.81		
	³ O Managing a home or being a homemaker?		O Didn't retire & Go to SECTIO	u n (hai	ye o		
	Taking care of a family member or close friend?	B.2	Would you say your retirement that is you retired when you want	was v	oluntary,		
	5 O Doing volunteer work?		5 O Yes				
	6 O Something else?		6 () No				
	Interviewer: if only one activity marked, go to SECTION D (page 8)	B.3	There are many preparations the for retirement. Did you	at peop	ole make		
A.45	Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only)		a. change your work pattern? (For example, work part-time or work more hours)	Yes	No 02 ()		
	1 O Managing a home or being a homemaker						
	² O Taking care of a family member or close friend		b. develop physical activities? .	03 🔾	04 ()		
	³ O Doing volunteer work		c. develop other leisure activities and hobbies?	05 ()	06 ()		
	4 O Something else	1	d. gather retirement information?				
	Now go to SECTION D (page 8)		(For example, talk with a consultant, attend a course)	07 ()	08 (
Stop	pped working		The next few questions are about your household financial preparations for retirement. Did you				
A.46	Which of the following are major activities in your life at this time? (Mark all that apply)		e. contribute to an RRSP?	09 (10 ()		
	5 () Managing a home or being a homemaker?		f. build up your savings?	11 0	12 ()		
	6 Taking care of a family member or close friend?		g. make other investments? (Includes buying properties)	13 ()	14 ()		
	⁷ O Doing volunteer work?		In preparation for retirement, did you				
	8 O Something else?		h. pay-off or avoid debts?	15 (16 🔾		
	Interviewer: if only one activity marked, go to A.48		i. make major purchases?	17 ()	18 🔾		
4.47	Of the activities just mentioned, what best describes the main thing you currently do? (Mark one only)	B.4	Do you have a pension plan throu (besides Canada Quebec Pension		loyment		
	Managing a home or being a homemaker		1 () Yes 2 () No				
	² Taking care of a family member or close friend						
	3 O Doing volunteer work		How long before retiring did you b prepare for your retirement? (For decisions like moving, paying deb be	example	e, make		
	Something else		3 ○ 1-2 years before retiring?				
A.48	Did you ever retire from a job or business? Exclude lay-offs, quitting, or stopping work to		4 3-5 years before retiring?				
	have a family.		5 O 6-10 years before retiring?		41/4		
	5 ○ Yes ▶ Go to SECTION B		6 O more than 10 years before ref	tiring?			
	6 ○ No ▶ Go to SECTION D (page 8)		7 O did not prepare				

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B.6	There are many reasons why Which of the following were rearetired?	asons v	vhy you	B.12	At the moment you officially retired, for whor you work? (Name of business, govern department or agency, or person.)	
		Yes	No			
	a. Your health	01 ()	02 (
	b. To provide care to a family member	03 ()	04 O			
1	c. Had adequate retirement income (such as pensions and investments)	05 ()	06 ()			
	d. Mandatory retirement policies	07 🔘	08 🔾	B 13	What kind of business, industry or service	wae
	e. Company early retirement plan	09 🔾	10 ()	0.70	this? (Give full description: e.g., federal government canning industry, forestry services.)	
	f. Your job ended and you were unable to find other work	11 0	12 ()			
	g. Pressure from co-workers					
	to retire	13 ()	14 ()			
	h. Wanted to stop working	15 (15 🔾			
B.7	Interviewer check item: (See A.1)					
	1 ○ If respondent is married or living common-law ▶ Go to B.8			B.14	What kind of work were you doing? (E.g., clerk, factory worker, forestry technician.)	office
	² Otherwise ▶ Go to B.9					
B.8	Sometimes people's reasons for influenced by their spouse/partner following reasons influenced your	. Which	n of the			
		Yes	No		1111111111111111111	
	a. Your spouse/partner's health	10	5 ()			
	b. Your spouse/partner's retirement income (such as pensions and investments)	3 ()	40	B. 15	In this work, what were your most import activities or duties? (E.g., filing documents, di	tant
	c. The timing of your spouse/ partner's retirement	5 ()	6 O		vegetables, forest examiner.)	
	d. Pressure from your spouse/ partner to retire	70	8 ()			
B.9	After you retired, did you ever go t any job or employment?	oack to	work at			
	¹ O Yes					
	2 O No D Go to B.12			R 16	In this job, did you work mainly	
B.10	Was this (Mark one only)			5.10	ar dis job, are you work manay	
	³ O for the same employer?				In your own business, farm or profession practice? ▶ Go to Section E (page 9)	ial
	4 O for a different employer?				of or others for wages, salary or commission	on?
	5 O for yourself or your own busin	ness?				
B.11	Was this mostly full-time work or pa	rt-time	work?	B.17	Was this	
	⁸ ○ Full-time				3 ○ In private business or industry?	
	7 O Part-time				4 () in the public sector?	
	Now I'm going to ask you about	the wo	rk you			
	were doing prior to this, that officially retired.	is whe	n you		Now go to SECTION E (page 9)	

SE	CTION C. Work and pre-retire	ement	Teite	eni-	CARLES OF THE REAL PROPERTY.	SALK -
The	next few questions ask about ement.		itions for	C.5	There are many reasons why people Which of the following will most likely reasons that you retire? Will it be	e retire
C.1	At the age you expect to retire, your income and investments wi enable you to retire?				Yes No	Don't know
	¹ O Yes				a. Your health? 01 0 02 0) 03 ()
	2 () No				b. Your need to	
	3 O Don't know				provide care to a family member? 04 O 05 O	06 🔾
C.2	There are many preparations to for retirement. Have you done any of the following	or are y	ou doing		c. Having adequate retirement income? (Such as pensions and investments) 07 08 0	09.0
	a. changed your work patterns? (For example, worked part-time		No		d. Mandatory retirement	03 ()
	b. (There are many preparations	01 ()	02 ()		policies? 10 11	12 ()
	that people make for retirement Have you done or are you doing any of the following)	nt.			e. Company early retirement plan? 13 0 14 0	15 🔿
	developed physical activities?	03 O	04 O		f. Your job ending and you being unable to	
	c. developed other leisure activities and hobbies?	05 ()	06 🔾		find other work? 16 17	18 ()
	d. gathered retirement information? (For example, talked with a consultant or	27.0			g. Pressure from co-workers to retire? 19 () 20 ()	21 ()
	attended a course)	07 ()	08 🔾		h. Wanting to stop working? 22 O 23 O	24 ()
	The next few questions are about your household financial preparations for retirement. Have you			C.6	Interviewer check item: (See A.1)	
	e. contributed to an RRSP?	09 🔾	10 🔿		1 ○ # respondent is married or #wing common-law ▶ Go to C.7	
	f. built up your savings?	11 0	12 ()		2 ○ Otherwise ▶ Go to SECTION E (page 9)	
	g. made other investments? (Includes buying properties)	13 ()	14 ()			
	In preparation for retirement, have you			C.7	Sometimes people's reasons for retirem influenced by their spouse/partner. Which following will most likely influence	of the
	h. paid-off or avoided debts?	15 🔾	16 ()		retirement?	: your
	i. made major purchases?	17 O	18 🔾		Yes No	Don't know
C.3	Do you have a pension plan throu (besides Canada/Québec Pension		oloyment		a. Your spouse/ partner's health 01 0 02 0	03 ()
	¹ O Yes			- 14	b. Your spouse/partner's retirement income (such as pensions	
	2 O No				and investments) 04 0 05 0	06 🔾
C.4	Do you feel that you are adequate your retirement?	ely prepa	aring for		c. Your spouse/ partner's retirement 07 0 08 0	09 O
	3 O Yes				d. Pressure from your spouse/partner to retire 10 0 11 0	12 ()

4 O No

5 O Don't know

Now go to SECTION E (page 9)

D.1					At what age do you expec	t your	spouse	partner	
. 1	for their future. Please tell me if you have done any or are currently doing any of the following				to retire?				
					Age Go to D.7				
		Yes	No		OR				
	a. developed physical					antian h	C 0	7	
	activities?	01 (05 🔘		01 O Don't expect him her to	retire P	GO TO D	/	
					02 O Don't know > Go to D.7				
	b. developed other leisure			De	Est voir specialization w	hinh of	the fe	louina	
	activities and hobbies?	03 (04 ()	D.6	For your spouse/partner, w were reasons for his/her retir			NOWING	
	c. gathered retirement					Yes	No	Don't	
	information? (For example, talked with a consultant or							know	
	attended a course)	05 🔾	06 🔾		a. Your own health?	01 (05 🔾	03 (
					b. Your spouse/partner's	04 ()	05 (06 ()	
					health?	~0	~0	~ 0	
	The next few questions are about your household financial preparations for the future.				c. The need to provide care to a family member?	07 ()	08 🔾	09 O	
	Have you				d. Having adequate retirement income?				
				41	(such as pensions				
	d. contributed to an RRSP?	07 🔘	06 🔾		and investments)	10 (11 0	12 ()	
					e. Mandatory retirement policies?	13 ()	14 ()	15 ()	
	e. built up your savings?	09 (10 🔾		f. Company early				
					retirement plan?	16 (17 (18 (
	f. made other investments? (Includes buying properties)	11 ()	12 ()		g. Lack of available work?	19 ()	20 ()	21 ()	
	to account on the the duture			D.7	Does your spouse/partner h				
	In preparation for the future, have you a paid-off or avoided debts? 13 0 14 0			plan through employmen Québec Pension Plan)?	t (besi	des C	anada/		
	g. paid-off or avoided debts?		16 ()		4 O Yes				
					5 ○ No F Go to SECTION E	next pag	je)		
	h. made major purchases?	13 ()	.00		6 ○ Don't know ▶ Go to SEC	TION E	(next pa	ge)	
D.2	Do you have a pension plan throu (besides Canada/Quebec Pension	igh emp Plan)?	oloyment	D.8	On the death of your spoureceive benefits from hi (excluding Canada Québec Age Security)?	s/her	ension	plan	
	¹ O Yes				1 ○ Yes ▶ Go to SECTION E	(next pa	ige)		
	2 O No				2 ○ No ▶ Go to SECTION E (пехт рад	je)		
					3 ○ Don't know ▶ Go to SEC	TION E	(next pag	ge)	
D.3	Interviewer check item: (See A.1)			D.9	Did your spouse/partner ha plan through employment Québec Pension Plan)?				
	3 () If married or living common-law	▶ Go to	D.4		Quenec relision Plan):				
					4 O Yes				
	4 ○ If widowed ▶ Go to D.9				5 ○ No • Go to SECTION E	next pag	ge)		
	5 O Otherwise > Go to SECTION E	(next pa	ige)		6 ○ Don't know ▶ Go to SEC	TION E	(next pa	ge)	
				D.10	On the death of your sporeceive benefits from hi				
D.4	Now we will talk about your spi	ouse/pa	rtner. Is		(excluding Canada Québec Age Security)?				
	your spouse/partner retired?				Age Security):				
					¹ O Yes				
	6 O Yes ▶ Go to D.6				2 O No.				
	7 () No				3 () Don't know				
	J								

SE	CTION E. Activities					
acti	v I am going to ask you a few questions about your vities. Physical activity includes activities you do		During a typical month, or rarely			
acti	vork, at home and in your leisure time. It includes vities like walking, gardening, washing windows, cing and golf.		d. do arts, crafts,		Sometimes	
			or other hobbies?	10 🔾	110	12 (
E.1	say that you are physically		e. read papers, magazines, or books?	13 ()	14 ()	15 (
	5 more active?		f. have family or	15.0	47.0	
	6 ○ as active?		friends over?	16 ()	17 ()	18 ()
	⁷ ○ less active?		I am going to ask you a fe	ew ques	tions abou	nt your
	8 O don't know	activ	rity outside your home.			
E.2	Do you consider the amount of physical activity you get to be	E.7	During a typical month, or rarely		Sometimes	
	1 () too much?		a. go to visit friends	Olubil	Julieuries	riatory
	² O too little?		or relatives?	19 🔾	20 🔾	21 ()
	3 the right amount?		b. go shopping? (Excluding groceries)	22 ()	23 ()	24 ()
	4 O don't know					
	- O GOTT MIOW		c. go out to movies?	25 (26 ()	27 🔾
E.3	Do you think that physical activity makes a difference in helping people avoid health		d. eat out?	28 ()	29 ()	30 🔾
	problems like heart disease and high blood pressure as they get older? Does it make		e. go out for a drive?	31 ()	32 ()	33 ()
	5 O a big difference?		f. go for a walk?	34 ()	35 (36 🔾
	6 O some difference?		g. go to clubs, church or a community centre?	37 ()	38 ()	39 🔾
	⁷ O little or no difference?		h. go to the library?	40 ()	41.0	42 ()
	8 O don't know		i. play cards or	<u> </u>		
E.4	Do you think that physical activity makes a difference in helping people remain independent	E.8	other games? This summer, did you	43 ()	40	45 ()
	as they get older? Does it make				Yes	No
	¹ () a big difference?	-01	a. attend sporting events?		10	2 ()
	² O some difference?		b. attend concerts, plays of performing arts events?			40
	3 Olittle or no difference?				-0	.0
	4 O don't know		c. go to museums or to art galleries?		5 (6 O
E.5	in the next year, do you intend to be more physically active, as active, or less active than	E.9	In general, do you feel s	afe and	secure in	your
	you are now?		house/apartment?			
	5 O More active		¹ O Yes			ļ,
	6 O As active		2 () No			
	⁷ O Less active		3 O don't know			
	8 O Don't know					
Now	I want to ask you some questions about activities	E.10	In general, do you feel sal your neighbourhood?	e and s	ecure <u>outs</u>	ide in
you	do in your leisure time.		4 ○ Yes ▶ Go to SECTION	F (next	page)	
E.6	During a typical month, do you often, sometimes or rarely		5 O No			
	Often Sometimes Rarely		6 ○ don't know ▶ Go to SE	CTION F	(next page	e)
	a. watch TV? 01 02 03 0 During a typical month, do you	E.11		your a	ctivities o	utside
	often, sometimes or rarely		your home			
	b. listen to radio, records, tapes, etc.?		a great deal?			
	c. have a chat with		2 osomewhat?			
	others on the phone? 07 O 08 O 09 O		3 O not at all?			

	CTION F. Health			-			-
heal					Have you done any of the followin stress from (Read 'Yes' response(s) Have you been	from F.3)?
F. 1	How would you describe your Would you say, in general, your !				The state of the s	Yes	No
					a. getting help from friends or relatives?	01 ()	02 C
	4 O excellent?				b. getting professional help?		04 C
	5 O good?					0	
	6 () fair?				c. getting help from someone who has dealt with a		
	o O lair?				similar experience? (Exclude self-help groups)	05 ()	06 (
	⁷ O poor?						_
	8 O Don't know				d. just trying to accept it?		08 C
					e. keeping busy?		10 C
2	Compared to other people your	age, wou	uld you	1	f. praying or meditating?	11 0	12 C
	say your health is				g. changing the amount you		•
) better?				smoke, drink or eat?	¹³ O	14 (
	O Dellar.				h. doing anything else to cope?	15 (16
	² about the same?				(Specify):	130	.0 (
	³ ○ worse?						
	4 O Don't know			F.7	I want to ask you some question		
					types of things you do on a daily healthy. Do you	Dasis	to sta
.3	How one feels at any particular	time is a	ffected			Yes	No
	by life experiences. In the pas have you	t tweive	montas		a. eat a balanced diet?	17 ()	18 (
	·	es No	Don't		b. get enough rest and sleep?	19 ()	20 (
			know				
	a. changed or lost a job? 01 (or lost a job? 01 0 02 0 03 0			c. keep physically active?		22 (
					d. brush your teeth?	23 🔾	24 (
	b. changed residence? 04 (050	06 🔾		e. avoid smoking?	25 🔾	26 C
		O 65 O	06 🔾		f. avoid alcohol, or		
	c. had a person move into	0 0 0 0					
	c. had a person move into or leave your home? 07 (F.8	f. avoid alcohol, or drink in moderation?	27 ()	28 (
	c. had a person move into or leave your home? 07 (09 ()	F.8	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of the state of	or amo	28 Count of
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 () 08 ()	09 ()	F.8	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the	or amo	28 Count of g-terr
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 () 08 ()	09 ()	F.8	f. avoid alcohol, or drink in moderation?	or amo	28 Count of g-terr
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend?	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	09 ()	F.8	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the	or amo	28 Count of
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend?	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	09 () 12 () 15 ()	F.8	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because or lilness, physical condition or health long term I mean a condition the expected to last more than 6 month.	or amo	28 Count of g-terr
	c. had a person move into or leave your home?	0 08 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of lilness, physical condition or health long term I mean a condition the expected to last more than 6 month. 1 Yes 2 No Go to F.15	or amo	28 Count of
	c. had a person move into or leave your home?	0 08 0	09 () 12 () 15 ()	F.9	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because or illness, physical condition or health long term I mean a condition the expected to last more than 6 month. Yes No Go to F.15 Are your activities limited	or amo or amo of a lon n probler at laster	28 Count of geters m? B
	c. had a person move into or leave your home?	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of lilness, physical condition or health long term I mean a condition the expected to last more than 6 month. 1 Yes 2 No Go to F.15	or amo	28 Count of g-ters m? B
	c. had a person move into or leave your home?	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because or illness, physical condition or health long term I mean a condition the expected to last more than 6 month. Yes No Go to F.15 Are your activities limited	or amount a lonn problem at lasterns.	28 Count of geterring Bill or i
- .4	c. had a person move into or leave your home?	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the expected to last more than 6 month. 1 Yes 2 No Go to F.15 Are your activities limited Yes No a. at home? 01 0 02 0	or amount a long problem at lasterns. Don't know	28 Count consumption of the count of the cou
F.4	c. had a person move into or leave your home?	0 08 0 11 0 14 0 17 0 20 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because o lilness, physical condition or health long term I mean a condition the expected to last more than 6 month. 1 Yes 2 No Go to F.15 Are your activities limited Yes No a. at home? 01 02 0	or amount a long problem at lasterns. Don't know	28 Count consumption of the count of the cou
F.4	c. had a person move into or leave your home?	0 08 0 11 0 14 0 17 0 20 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the expected to last more than 6 month. 1 Yes 2 No Go to F.15 Are your activities limited Yes No a. at home? 01 02 0 b. at work (or school)? 05 06 0 c. in other activities	or amount a long problem at lasterns. Don't know	28 Count consumption of the count of the cou
F.4	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend? 13 (f. had a serious illness or injury? 16 (g. had a family member or a friend seriously ill or injured? 19 (Interviewer check item:	0 08 0 11 0 14 0 17 0 20 0	09 () 12 () 15 ()		f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the expected to last more than 6 month. Yes No Go to F.15 Are your activities limited Yes No a. at home? 01 02 0 b. at work (or school)? 05 06 0 c. in other activities (such as leisure time pursuits or	or amount a long problem at lasterns. Don't know 03 0	28 Count of geterm? B of or i
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend? 13 (f. had a serious illness or injury? 16 (g. had a family member or a friend seriously ill or injured? 19 (Interviewer check item: 1 If any marked "Yes" in F.3 > 6	0 08 0 11 0 14 0 17 0 20 0 Go to F.5	09 () 12 () 15 () 18 ()	F.9	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because o lilness, physical condition or health long term I mean a condition the expected to last more than 6 month. 1 Yes 2 No Go to F.15 Are your activities limited Yes No a. at home? 01 02 0 b. at work (or school)? 05 06 0 c. in other activities (such as leisure	or amount a long problem at lasterns. Don't know 03 0	28 Count of geterm? B of or i
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend? 13 (f. had a serious illness or injury? 16 (g. had a family member or a friend seriously ill or injured? 19 (Interviewer check item:	0 08 0 11 0 14 0 17 0 20 0 Go to F.5	09 () 12 () 15 () 18 ()	F.9	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the expected to last more than 6 month. Yes No Foo to F.15 Are your activities limited Yes No a. at home? 01 02 0 b. at work (or school)? 05 06 0 c. in other activities (such as leisure time pursuits or transportation)? 09 10 0	or amount a long problem at lasterns. Don't know 03 0	28 Count of geterm? B of or i
	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend? 13 (f. had a serious illness or injury? 16 (g. had a family member or a friend seriously ill or injured? 19 (Interviewer check item: 1	0 08 0 11 0 14 0 17 0 20 0 Go to F.5	09 () 12 () 15 () 18 ()	F.9	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the expected to last more than 6 month. Yes No less of the F.15 Are your activities limited Yes No a. at home? 01 02 0 b. at work (or school)? 05 06 0 c. in other activities (such as leisure time pursuits or transportation)? 09 10 0	or amount a long problem at laster as. Don't know 03 0 07 0	28 Count of geterm? B of or i
F.4	c. had a person move into or leave your home? 07 (d. had a death in the family? 10 (e. had a death of a close friend? 13 (f. had a serious illness or injury? 16 (g. had a family member or a friend seriously ill or injured? 19 (Interviewer check item: 1	0 08 0 11 0 14 0 17 0 20 0 Go to F.5	09 () 12 () 15 () 18 ()	F.9	f. avoid alcohol, or drink in moderation? Are you at all limited in the kind activity you can do because of illness, physical condition or health long term I mean a condition the expected to last more than 6 month. Yes No Foo to F.15 Are your activities limited Yes No a. at home? 01 02 0 b. at work (or school)? 05 06 0 c. in other activities (such as leisure time pursuits or transportation)? 09 10 0	or amount a long problem at laster as. Don't know 03 0 07 0	N/A

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F.11	How well do you feel you are co limitation? Would you say	pping v	vith this	F.15	Do you have any of the for	ollowing	heal	lth-car
	³ () very well?						Yes	No
	4 O fairly well?				a. bathroom modifications such as handrails?		01 0	02 C
	5 O not very well?				b. extra handrails throughout your home?		03 🔾	04 C
	6 O not at all well?				c. a street-level entrance			
	7 O Don't know				(no steps)?		05 (06 C
F.12	For each of the following activities can do it yourself, if you need as you are totally unable to do it. Self		ce, or if		d. closed-captioned TV? (A sy for hearing-impaired televis viewers whereby a simplifie version of the dialogue is po on screen via a special deci-	ion ed rinted)7 O	08 🔿
	a. Walking about 3 city blocks without resting . 01 ()	02 O	03 O		e. some other modifications to your home? (Specify):	0) O ed	10 🔾
	b. Walking up or down a flight of stairs 04 (05 (06 ()				: :	
100				F.16	Would you describe your life a	as		
	c. Dressing or undressing 07 🔾	08 🔾	09 🔾		¹ O very stressful?			
	d. Cutting your own toenails 10 〇	11 0	12 🔾		2 ○ not very stressful? ▶ Go	to F.18		
	e. Using the toilet 13 ()	14 (15 🔿		3 ○ not at all stresstul? ▶ Go	to F.18		
				F.17	What is the main reason for th		?	
F.13	Because of your condition, do you the following health-care features?	u have	any of		Is it related to (Mark one onl 4 employment?	(y)		
		Yes	No		5 () family?			
	a. bathroom modifications?	16 🔾	17 ()					
	b. extra handrails throughout	18 🔿	19 (6 health?			
	your home?	100	19 ()		7 O finances?			
	c. access ramps?	50 🔾	21 ()		8 Something else? (Specify)		1 1	1 1 1
	d. widened doorways?	22 ()	23 🔾					
×	e. a street-level entrance (no steps)?	24 (25 ()		Here is a list that describes people feel at different times. I weeks, how often have you fel	During the	f the he pa	ways
	f. an entrance that opens automatically?	26 🔾	27 ()			Often Som	netime:	s Never
	g. an elevator or lift device?	28 🔾	29 (a. On top of the world? Was it	01 0 02	2 0	03 🔘
	g. an elevator of fire device:				During the past few weeks, how often have you felt			
	h. handicap parking?	30 🔾	31 (b. very lonely or remote from other people? Was it	W O 01		06.0
	i. some other modifications to your home? (Specify):	32 (33 🔾		During the past few weeks,			w ()
					how often have you felt c. particularly excited or interested in something?	7 08	3 0	09 ()
F.14	Do you have any of the following	ng elec	ctronic		d. depressed or very		0	
	devices?	Yes	No		e. pleased about having	00 11	0	12 (
	a. Voice Print? (National Broadcast Reading Services - daily readings				accomplished something?	3 0 14	0	15 🔾
	of newspapers and magazines via a broadcast system, that is,			1	f. bored? 1	6 0 17	0	18 🔾
	radio or cable designed for visually-impaired individuals)	10	20	5	g. proud because someone complimented you on	9 0 20		31.0
	b. Closed-captioned TV? (A system for hearing-impaired television				something you had done? 19		0	21 0
	viewers whereby a simplified				3	2 () 23	0	24 (
	version of the dialogue is printed on screen via a special decoder)	3 ()	40	1	that things were going your way? 2:	5 0 26	0	27 🔿
	Now go to F.16			j	. upset because someone criticized you? 2	8 🔾 29	0	30 🔾

				- 1	2 -				
SEC	TION G. Social Support	1			W.				
time one	e are many ways in which p and skills. It is hard to rem could have done during the you specifically	ember	all the	things		now going to ask you about any received on a regular basis. During the past twelve mont	hs, hav	e you	
G.1	3.1 During the past twelve months, have you regularly provided any of the following types o assistance to others, either living with you o outside your home? Have you provided help			rpes of		regularly received any of the followssistance from others either living from outside your home? Have help with	her living with you o		
	outside your home? Have with	e you	provide	d help		Ye	s No	Don't know	
		Yes	No	Don't know		a. housework? 19 C	20 (21 ()	
	a. housework?	31 ()	32 🔾	33 🔾		b. yardwork? 22 C	23 (24 ()	
	b. yardwork?	34 ()	35 🔿	36 🔾		c. meal preparation? 25		27 ()	
	c. meal preparation?	37 ()	38 (39 ()		d. grocery shopping? 28 C	29 🔾	30 🔾	
	c. mear preparadons					e. transportation? 31 C	32 ()	33 ()	
	d. grocery shopping?	40 🔾	41 ()	42 ()		f. babysitting? 34 C	35 🔾	36 🔾	
	e. transportation?	43 🔾	44 ()	45 🔾		g. managing money? 37	38 🔾	39 🔾	
	f. babysitting?	46 🔾	47 ()	48 🔾		h. personal care (such as bathing, dressing)? 40	41 ()	42 ()	
	g. managing money?	49 🔾	50 🔾	51 ()		i. emotional support? 43 C	40	45 🔿	
	h. personal care (such as bathing, dressing)?	52 ()	53 ()	54 ()	G.5	Interviewer check item:			
	1	55 (56 (57 ()		1 ○ If any marked "Yes" in G.4 ▶ G	io to G.6		
	i. emotional support?j. volunteer service through					2 ○ Otherwise ▶ Go to G.7			
	a group or organization?	58 🔘	59 🔾	60 (G.6	Who helped you? Was it			
G.2	Interviewer check item:						Yes	No	
	1 () If any marked "Yes" in G	1 N G0	m G 3			a. your action tables ?	01 ()	02 ()	
		GO	10 0.3			b. a mother/father?	03 O	04 ()	
	2 Otherwise ▶ Go to G.4					c. a son?	05 🔾	06 🔾	
G.3	Who did you help? Was it					d. a daughter?	07 🔾	08 🔾	
			Yes	No		e. a grandchild?	09 ()	10 ()	
	and the second of the second o		01 ()	02 ()		f. another family member?			
	b. a mother/father?		03 🔾	04 ()		(An in-law or brother/sister)	11 ()	12 ()	
	c. a son?		05 ()	06 ()		g. a friend or neighbour?	13 🔾	14 ()	
					117	or organization?	15 ()	16 🔾	
	d. a daughter?		07 🔘	08 ()		I. someone else? (specify):	17 ()	18 🔾	
	e. a grandchild?		09 🔾	10 0					
	f. another family member? (An in-law or brother sister	r)	11 0	12 ()	G .7	During the past twelve months,			
	g. a friend or neighbour?		13 🔘	14 🔾		pate in a self-help group in which common problem help each other	? (For ex	ample,	
	h. a volunteer group or organization?		15 🔘	16 🔾		groups for people who have had have cancer, groups for recent divorced people, Alcoholics Anony	ly widow	ved or	

1 O Yes

2 O No

3 O Don't know

I. someone else? (specify): 17 🔘 18 🔘

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	I have a few questions about your family.	G.14 Not counting family members, do you have any close friends? That is, do you have any friends
G.8	How many brothers and sisters do you have still living? (Include step, adopted, and half brothers and sisters).	
	Number	5 O Yes
	OR	6 ○ No ▶ Go to G.19
	94 O None	
G.9	How many children do you have still living? (Include step and adopted children).	G.15 How many close friends do you have?
	Number	Number of close friends
	OR	
	95 O None	G.16 Thinking about the friend you feel closest to does this person live (Mark one only)
close	uld like you to think now about your family and friends. By family, I mean spouse or partner, ren and other relatives.	¹ in the same household as yourself?
G.10	Do you have any family members you feel close to? That is, family members you feel at ease	² O within your neighbourhood?
	with, can talk to about private matters, or can call on for help?	³ within the same city or town?
	6 ○ Yes ▶ How many?	4 O in another city or town?
	7 ○ No ▶ Go to G.14	
G.11	Thinking about the family member you feel closest to, does this person live (Mark one only)	G.17 Is this closest friend male or female?
		5 O Male
	in the same household as yourself?	6 ○ Female
	² O within your neighbourhood?	
	3 O within the same city or town?	
	4 () in another city or town?	G.18 Are you satisfied or dissatisfied with the kind and frequency of contact you have with friends, including personal contact, phone calls and letters?
G.12	Is this closest family member male or female?	
	5 O Male	1 O Satisfied
	6 O Female	² O Dissatisfied
G.13	Are you satisfied or dissatisfied with the kind and frequency of contact you have with family members, including personal contact, phone calls	Is that very or somewhat?
	and letters?	³ O Very
	1 O Satisfied	4 O Somewhat
	² O Dissatisfied	
	Is that very or somewhat?	G.19 Do you have a household pet?
	3 O Very	5 O Yes
	4 O Somewhat	6 O No

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	CTION H. Dwelling Characteristics & Accide	1	
The H.1	next questions concern your home. Is your home in need of any repairs? (Do not include desirable remodelling, additions or conversions)		Is this with a mortgage or is the mortgage completely paid off? (If more than one property, select the higher mortgage). 5 With mortgage
	¹ ○ Yes ² ○ No (only regular maintenance) ▶ Go to H.3		6 ○ Paid off completely ▶ Go to H.11 7 ○ Don't know ▶ Go to H.11
H.2	Does it require major or minor repairs? (Examples of major repairs are sagging floors, damaged walls or damaged electrical wiring. Examples of minor repairs are broken windows, leaking sinks or small cracks in interior walls). 3 Major repairs 4 Minor repairs		What is the amount remaining on this mortgage? \$ (nearest thousand - if greater than 995, enter 996) 997 O Don't know 998 O Refused
	5 O Both	H.11	Is this property
H.3	Do you for your spouse parmer own or rent this dwelling? 6 ○ Own		Inside Canada? Outside Canada?
	7 ○ Rent ▶ Go to H.8 8 ○ Other ▶ Go to H.8		If you were selling this property now, for how much would you expect to sell it? (nearest thousand -
H.4	Is this with a mortgage or Is your mortgage paid off completely? 1 With mortgage 2 Paid off completely Go to H.6		\$
H.5	3 ○ Don't know ▶ Go to H.6 What is the amount remaining on your mortgage? \$ (nearest thousand - if greater than 995, enter 996)		Have you moved in the past 5 years, that is, since September 1986? 7 ○ Yes 8 ○ No ▶ Go to H.15
	997 O Don't know 998 O Refused		What were the reasons for this move? (Mark all that apply)
H.6	If you were selling this dwelling now, for how much would you expect to sell it? \$ (nearest thousand - if greater than 995, enter 996) 997 () Don't know 998 () Refused	(To provide care support to a relative To receive care support from a relative Job change or transfer Retirement (of self or spouse/partner) Decline in health (of self or spouse/partner)
H.7	In addition to your present home do you own other property? (For example, vacation home, rental property, business property or any other real estate). 1 O Yes > Go to H.9 2 O No > Go to H.13	C	Death of spouse partner
H.8	Do you own any property elsewhere? (For example, vacation home, rental property, business property or any other real estate) 3 Yes		Wanted more opportunities for recreation, leisure and physical activity Other (Specify):
	4 ○ No ▶ Go to H.13		

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H.15	Many new products avail an independent life. The			Accident and Safety
	some electronic devices			H.16 Interviewer check item:
12	your home.	(a sha as a		1 ○ If respondent is 65 years or over. (see A.3 & A.4) ▶ Go to H.17
	or use a	in the next year intend to acqu		
		Yes	No	² Otherwise ▶ Go to SECTION J (page 17)
18	1. Microwave oven?			I am now going to ask you some questions about
	01 O Yes			safety in and around your home.
	02 O No) 04 O	05 ()	H.17 Thinking about the past twelve months, were you injured in an accident around your home? We are looking for an injury that altered your routine for at least a day.
	03 O Don't know			3 ○ Yes
				4 ○ No ▶ Go to H.25
	2. Cable TV?		577	
4	06 O Yes			H.18 Thinking about the most recent accident, what injuries did you have? (Mark all that apply)
	07 O No	10 0	110	01 O Cuts
	08 O Not available			02 O Bruises
	00 O Basis Issue			03 O Dislocations
	09 O Don't know			04 O Fractures
	3. Pay TV?			05 O Sprain/Strain
	3. Fay 1V:			06 Choking Suffocation
	12 O Yes			07 O Swelling
	13 O No	▶ 16 ○	17 0	08 O Burns
	14 () Not available			09 O Scalds
				10 Paisoning
	15 O Don't know			11 O Concussion
	4.4000			12 O Tenderness
	4. VCR?			H.19 Where did the accident happen?
	18 O Yes			13 O Kitchen
	19 O No	21 (22 (14 O Basement stairs
	20 () Don't know			15 O Basement
	20 O BOTT KNOW			16 O Driveway
	5. Computer?			17 O Frontyard
-				18 O Backyard
	23 O Yes			19 O Path or sidewalk
	24 O No	▶ 26 ○	27 ()	20 Stairs
	25 O Don't know			21 O Living room
				22 O Dining room
	6. Satellite dish?		15	23 O Bathroom
	28 () Yes			24 O Bedroom
				25 O Hallway
	29 O No	▶ 31 ○	32 🔾	26 O Entrance way
	30 O Don't know			27 Other
				O Guidi

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H.20	Did any equipment or product contribute to the accident? 1 O Yes	H.25 In the past twelve months, were you injured in an accident away from your home (excluding automobile accidents)? We are looking for an injury that altered your routine for at least a day. 5 Yes				
	² ○ No ▶ Go to H.22	6 ○ No ▶ Go to SECTION J (next page)				
H.21	What was it?	H.26 Thinking about the most recent accident, what injuries did you have? (Mark all that apply)				
	³ O Kitchen equipment	01 O Cuts				
	4 O Bathroom fixtures	02 O Bruises				
	5 Chemicals	03 O Dislocations 04 O Fractures				
	6 O Electrical equipment	05 O Sprain Strain				
	7 O Carpet or stairs	06 Choking Suffocation				
	8 Other	07 O Swelling				
	o o other	08 O Burns				
H 22	What time of day did the accident happen?	09 O Scalds				
		10 O Poisoning				
	1 Morning	11 O Concussion				
	² Afternoon	12 O Tenderness				
	3 O Evening	H.27 What time of day did the accident happen?				
	4 O During the night	¹ O Morning				
		² Afternoon				
H.23	Did you get treatment from a health care	³ ○ Evening				
	professional, such as a doctor, or did you treat the injury yourself?	4 O During the night				
	5 O Health care professional	H.28 Did you get treatment from a health care				
	6 O Self	professional, such as a doctor, or did you treat the injury yourself?				
	⁷ ○ Both	5 Health care professional				
	Estate in the little of the left of the le	6 O Self				
H.24	Did this accident happen in the	⁷ O Both				
	¹ ○ Fall?	H.29 Did this accident happen in the				
		1 O Fall?				
	2 O Winter?	² O Winter?				
	3 ○ Spring?	³ ○ Spring?				
	4 O Summer?	4 O Summer?				

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SE	CTION J. Transportation and Travel		
and	e next section includes questions on transportation I the travels you may have done within the past live months.		Within the past twelve months, did you take a trip lasting more than one day outside your city or town?
J.1	Do you have a valid driver's license?		⁷ ○ Yes
	5 O Yes		
	6 ○ No ▶ Go to J.5		8 ○ No ▶ Go to SECTION K (next page)
J.2	Do you or any member of your household lease or own a car or truck?	J.9	Within the past twelve months, dld you take a trip away from home which lasted 4 weeks or more, excluding any business trips?
	⁷ ○ Yes		¹ O Yes
	8 ○ No ▶ Go to J.5		
J.3	Do you use this vehicle mostly as a driver or passenger?		² ○ No ▶ Go to SECTION K (next page)
	¹ O Mostly as a driver	J.10	Was this trip within Canada or outside Canada?
	² O Mostly as a passenger		3 Within Canada
	3 ○ Does not use this vehicle ▶ Go to J.5		Outside Canada
J.4	How often do you drive?		5 O Both
	4 O More than 3 times a week?	J.11	In what months were you away? (Mark all that apply)
	5 O 1 to 3 times a week?		
	6 O 1 to 3 times a month?		01 O September
	⁷ C Less than once a month?		02 October
	8 O Never?		03 O November
J.5	Is public transportation, for example, bus, rapid transit or subway, available in your area?		04 O December
	¹ O Yes		05 O January
	2 ○ No ▶ Go to J.8		06 O February
J.6	Within the past twelve months, have you used local public transportation?		07 March
	³ O Yes		08 O April
	4 O No		09 O May
J.7	Within the past twelve months, have you wanted to use local public transportation but been unable to do so?		10 O June
	5 O Yes		1: O July
	€ ○ No		12 O August

_	CTION K. Demographic Characteristics	K.5		
K.1 Were you born in Canada?			Canadians come from many ethnic or cultura backgrounds (such as French, German, Italian)	
	¹ ○ Yes ▶ Go to K.3		From which ethnic or cultural background die	
	2 O No		your parents descend? (Accept multiple responses do not probe)	
<.2	In what country were you born?		12 O English	
	01 O United Kingdom		13 () French	
	02 O Italy		14 O German	
	03 O U.S.A.		15 (Italian	
	04 () India			
	05 () U.S.S.R.		16 O Scottish	
	06 O Germany		17 O Irish	
	07 O Poland		18 O Ukrainian	
	08 () Portugal		19 Chinese	
			20 O Dutch	
	09 O Rep. of China		21 O North American Indian	
	10 Netherlands		22 () Jewish	
	11 O Other (Specify):		23 O Polish	
()	What languages do you speak well anough to		24 C East Indian	
(.3	What languages do you speak well enough to conduct a conversation?		25 O Portuguese	
	12 () English		26 O Greek	
	13 () French		27 Canadian	
	14 () Italian		28 Other (Specify):	
	15 German		,	
	16 Chinese 17 Ukrainian		Did you have any wartime service in the active	
			military force of Canada or its allied forces?	
	18 O Portuguese		¹ 🔘 Yes, Canadian	
	19 O Dutch		² Yes, Allied Forces	
	20 O Polish		3 ○ No ▶ Go to K.9	
	21 O Greek	K.7	In which war or conflict did you serve?	
	22 Other (Specify):		(Mark all that apply)	
			4 O World War I	
	Interviewer: If only one language, go to K.5		5 O World War II	
			6 () Korean Conflict	
<.4	What is your main language, that is the language in which you are most at ease? (Mark more than		7 () Persian Gulf	
	one only if the respondent is equally at ease in more		8 Other	
	than one language)		O Outer	
	01 O English	K.8	Did you serve in	
	02 O French	J.	1 O Canada	
	03 O Italian		² Overseas	
	04 O German		3 O Both	
	05 O Chinese	K.9	Interviewer check item:	
	06 O Ukrainian		4 ○ If single (see A.1) ▶ Go to Section L	
	07 O Portuguese		(next page)	
	08 O Dutch		5 ○ Otherwise ▶ Go to K.10	
	09 () Polish	K.10	Are you a spouse/partner or widow(er) of	
	10 O Greek		Canadian or Allied veteran?	
	11 O Other (Specify):		6 Yes, Spouse/partner	
	Other (Specify).		7 () Yes, Widow(er)	

SE	CTION L. INCOME					
	se next few questions are a nces.	bout y	our ho	usehold	The	next questions are about your personal income.
L.1	In general, how well do your income and investments currently satisfy your needs?				L.6	Are you currently receiving income from any of the following sources? Are you receiving income from
	1 O very well?					Yes No
13	² () adequately?					a. work (self-employment, salaries, wages, commissions, tips)? 01 02 0
	O bacquaidi,					b. a retirement pension
	³ O not very well?					(include superannuation and annuities)? 03
	4 O totally inadequately?					c. government pension?
	5 O Don't know					05 Yes Are you receiving income from
						06 O No 1) Old Age Security
L.2	Looking to your future, ho your income and investme satisfy your needs?					Pension, Guaran- teed Income Supplement, Spouse's
	1.0					Allowance? 07 08 0
	1 O very well?					2) Canada/ Québec
	² adequately?					Pension Plan? . 09 0 10 0
	3 O not very well?					d. other government sources (such as Unemployment Insurance Benefits, Social Assistance,
	4 O totally inadequately?			211		worker's compensation, disability insurance, family allowances,
	5 O Don't know					veteran's allowance)? 11 0 12 0
L.3	Do you have any large debts, that is of \$5,000 or					e. investments (interest, dividends, capital gains, net rents)? 13 0 14 0
	more (exclude mortgages)?					f. income from other family members?
	6 O Yes					g. income from other sources
	7 ○ No ▶ Go to L.5					(alimony, family inheritance, estate)?
					L.7	
	8 ○ Don't know ▶ Go to L.5					Interviewer check item: 1 () If more than one 'Yes'
	9 O Refused > Go to L.5					marked in L.6 ▶ Go to L.8
L.4	Is this debt a		3.1			2 Otherwise ▶ Go to L.9
		Yes	No	Refused	L.8	Of all your income sources you have mentioned,
	a. personal loan?	01 ()	02 🔾	03 🔾		which one do you consider the main source?
	b. car loan?	04 ()	05 🔾	06 🔾		Income from work (self-employment, salaries, wages, commissions, tips)
	c. home improvement loan?	07 (08 🔾	09 (Income from a retirement pension (including superannuation and annuities)
	d. credit card debt?	10 ()	11 0	12 ()		5 O Income from government pension (Old Age Security, guaranteed Income
	e. other debt?	13 🔿	14.0	15 (Supplement, Spouse's Allowance, Canada Québec Pension plan)
						6 O Income from other government sources
L.5	At the present time, are financial responsibility for			ng any		(such as Unemployment insurance Benefits. Social Assistance, Worker's Compensation, disability insurance, family allowances,
		Yes	No			veteran's allowance)
	a. a child?	10	2 0			7 Income from investments (interest, dividends, capital gains, net rents)
	b. any other family member?	3 ()	40			8 O Income from other family members
	c. anyone else?	5 ()	e O			9 O Income from other sources (alimony, family inheritance, estate)

		f your own income	SECTION M. Overall satisfaction		
Was your inc		13 C Less than \$5,000?	about your life as a whole? Are you satisfied or dissatisfied?		
10 ∩ Less than		or more?	¹ ○ Satisfied		
\$20,000?		Γ	² Oissatisfied		
		15 O Less than \$15,000?	is that very or somewhat?		
	12 (\$10,000 or more?	10.15	3 O Very		
		16 \$15,000 or more?	4 O Somewhat		
1		5	O Southernal		
	_	23 O Less than \$30,000?	SECTION N. Contacts for follow-up		
	21 O Less than . \$40,000?		N.1 Statistics Canada is conducting this survey		
		24 O \$30,000 or more?	jointly with Health and Welfare Canada. The information collected will be kept confidential and		
20 (\$20,000	97 131	_ or more?	used only for statistical purposes. Do you agree		
or more?		25 O Less than	to share your answers with Health and Welfare Canada?		
	District No. of Co.	\$60,000?	5 () Yes		
	22 (\$40,000 -	26 O \$60,000 to	€ O No		
	or more?	\$80,000?	<u> </u>		
		27 () more than	This survey is part of a larger project. For this reason, we may need to contact you some time in the future.		
94 () No income	e	\$80,000?			
95 O Don't kno			N.2 Would you be willing to be contacted in the future for a follow-up of this project?		
96 () Refused			⁷ ○ Yes		
Interviewer: if	mber I none ▶ Go to SEC				
all househole		the total income of all sources, before t			
		33 O Less than	² ○ Correction ▶ Address:		
	31 O Less than -	\$5,000?			
	\$10,000?	34 () \$5,000	1::::::::::::::::::::::::::::::::::::::		
30 O Less than		or more?			
\$20,000?		35 O Less than \$15,000?	N.4 In case you move or change telephone numbers, it would be helpful if you could provide the name,		
	32 \ \$10,000 - or more?		address and telephone number of someone we could contact, such as a friend or relative, who		
		36 (\$15,000 or more?	would help us to contact you.		
		_	Name of Contact:		
		43 O Less than \$30,000?	First name		
	41 O Less than - \$40,000?		Last name		
		44 O \$30,000 or more?			
40 O \$20,000 - or more?			Address of Contact:		
or more:		45 O Less than \$60,000?			
		500,000 :			
	42 (\$40,000 -	46 O \$60.000 to			
	or more?	\$80,000?	Phone number:		
		47 O more than			
97 O Don't know	W	\$80,000?			
98 O Refused			THANK YOU		

Survey of Work Arrangements



Survey Month: November 1991

Title: Survey of Work Arrangements

Sponsor: Statistics Canada

Survey Method: Personal/Telephone Interview

Sample Size: All civilian members 15 to 69 years of age in LFS rotation groups 1, 3 and 6

Objectives:

The Labour Force Survey only gives weekly hours of Canadian workers but does not provide any detail about their work schedules or the reasons for such arrangements. The objectives of the Survey of Work Arrangements are to provide additional information on the main and second paid-worker jobs of respondents on issues such as:

- work schedule, e.g., days of the week, hours of work,

- how much control they have over their schedules, e.g., how many are "on call" and how many are on a flexible schedule,

- how many home-based workers there are and why they work at home,

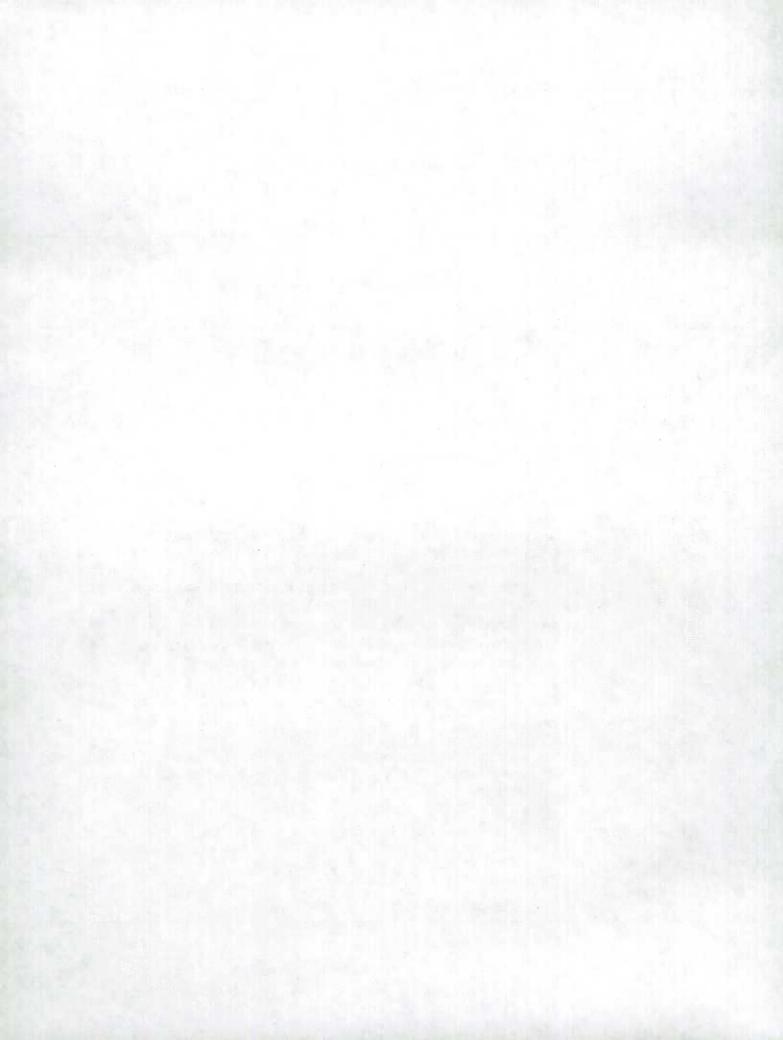
 how many "moonlighters" there are and why they hold down two jobs at once.

Some additional information about pay, overtime, unionization, temporary or permanent character of jobs will be gathered to expand the knowledge of today's jobs.

Project Manager: Elizabeth Majewski (951-4584)

Microdata: Yes Price No

X \$500.00



1+1	Statistics Statistique Canada Canada SURVEY OF WORK A	ARRANGEMENTS CONFIDENTIAL when completed VERSION FRANCAISE DISPONIBLE
	Doctor No. 2 Survey date 3	Assignment No. 4
HPD	cage – line No. Given name Mo. Yr.	Surveyo 1 FORM NO. U 6
5	6	
10:	INTERVIEWER CHECK ITEMS	19. How long has had this schedule at this job?
	I I Item 50 on F05 is	Less than one month
IUA		1 month to less than 6 months 20
	blank	6 months to less than 1 year 3 O
	Otherwise ² O END	1 year to less than 2 years 4 O
10B	If item 76 on F05 is	2 years to less than 5 years ⁵ O
	"paid worker" (code 1) 3 Go to 11	5 years or more
	Otherwise 40 Go to 32	Don't know
	Otherwise	20. What is the main reason that works this schedule?
11.	This month we are asking some additional questions on work	(Mark one only)
	schedules.	Earn more money
3.11	How many weeks per month does usually work at higher main lob?	Care for children2O
		Care for other family members 3
	weeks	Allow time for school
	Works	Requirements of the job/no choice ⁵ O
12.	How many days a week does usually work at this job?	Other reason 6
		21. Some people work all or some of their regularly scheduled hours
	days OR It varies 8 O	at home.
40	Methods down at the control of the c	Excluding overtime, does usually work any of his/her scheduled hours at home?
13.	Which days of the week does usually work at this job?	Yes
	Monday to Friday only ¹ O	No 8 Go to 25
	OR (Mark all that apply)	
	Monday ² Tuesday ³	22. What is the main reason works at home?
	Wednesday . 4 O Thursday 5 O	Care for other family members
	Friday 6 Saturday 7	Other personal/family responsibilities. 3
	Sunday ⁶ O	Requirements of the job 40
	OR	Home is usual place of work ⁵ O
	Days vary from week to week ⁹	Other reason 60
	Days vary from week to week	
14.	How many hours per day does usually work at his/her main	23. Does's employer provide any equipment or supplies for this work done at home?
	job?	Yes ¹○
-	1 hrs min OR It varies 20	No 8 O
	The state of the s	24. Last week, about how many scheduled hours did work at
15.	At what time does usually begin work at this job?	home?
	3 OR It varies 40	1 hrs min OR None 20
16.	At what time does usually end work at this job?	25. At this lob, what was 's usual wage or salary before taxes and
	and the same and the same	other deductions?
	5 OR It varies 6	
4-		*
17.	is on a flexible schedule that allows workers to choose the time they begin and end their work day?	Hourty
	Yes 10	Daily 3 Monthly 4 Weekly 5 Yearly 6
	No2O	Weekly ° Yearly ° Every two weeks ° Other 8
		Don't know 90
	Don't know ³	
18.	Which of the following best describes is work schedule?	26. Last week, in addition to the scheduled hours, dldwork any hours of paid overtime?
	Is it? (Mark one only)	Yes ¹
	A regular daytime schedule 1 Go to 21	No
	A regular evening shift	OU (U 29 (UTNEN SIDE)
		27. How many hours of paid overtime did , work last week?
	A regular night or graveyard shift 3	
	A rotating shift (that changes periodically from days to evenings	3 hrs min
	or nights)4	28. When the cots of may fee those house and it.
	A split shift (consisting of two distinct	26. Was the rate of pay for these hours mainly? (Mark one only) Straight time
	periods each day) 5	Time and a hatf
	On call6	Double time 6 Go to 29
	An Irregular schedule	Other 70 (OTHER SIDE)
	Other	Don't know

29.	is a union member or covered by a union contract or collective agreement in this job?	41. At what time does usually begin work at this job?	i
	Yes10	3 OR It varies 40	
	No	42. At what time does usually end work at this job?	
30.	Is's work for this employer a temporary job (that is, a job	42. At what time does ususiny end work at this job?	
	lasting 6 months or less)?	OR It varies 6	
	Yes	43. Is , on a flexible schedule that allows workers to choose	n the
	No	time they begin and end their work day?	Live
31.	Is's salary paid by a temporary help agency (that is, by a business or service which supplies workers on a temporary	Yes ¹ O	
	assignment to other businesses)?	No 2 O	
	Yes 5 O	Don't know 3 O	
	No 6O	Don't know • O	
32.	INTERVIEWER CHECK ITEM	 (Some people work all or some of their regularly scheduled h at home.) 	ours
	If Item 77 on F05 is	Excluding overtime, does usually work any of his	a/her
	"peid worker" (code 1) 1 O Go to 33	scheduled hours at home?	
	Otherwise	Yes 4 O	
22	The following questions refer to 's other job last week. (If more	No 5 Go to 48	
33.	than one other job, choose the one with more hours)		
	For whom did work in this job?	45. What is the main reason works part of his/her scheduled h at home?	ours
		Care for children 10	
		Care for other family members ²	
		Other personal/family responsibilities ³	
34.	What kind of business, industry or service was this?	Requirements of the job	
		Home is usual place of work	
		Other reason	
		46. Does's employer provide any equipment or supplies for	this
35.	What kind of work wasdoing?	work done at home?	
		Yes ⁷ O	
		No 8 🔾	
		47. Last week, about how many scheduled hours did wor	rk at
36.	In this work, what were's most important activities or duties?	1 hrs min. OR None	20
		48. At this job, what was's usual wage or salary before taxes other deductions ?	and
37.	How many weeks per month does usually work at this job?	\$	
		Hourly 1 Twice a month 2 Daily 3 Monthly 4	
	weeks	Weekly 50 Yearly 60	
38.	How many days a week does usually work at this job?	Every two weeks ⁷ Other 80	
	days OR it varies 8 ○	Don't know9	
60		 What is the <u>main</u> reason that worked at more than one last week? (Mark one only) 	Job
39.	Which days of the week does usually work at this job? Monday to Friday only	Meet regular household expenses ¹ O	
	OR (Mark all that apply)	Pay off debts 2	
	Monday ² Tuesday ³		
	Wednesday 4 Thursday 5	Buy something special ³	
	Friday 6 Saturday 7	Save for the future	
	Sunday 80	Gain experience 5	
	OR	Build up a business 6	
	Days vary from week to week		
		Enjoys the work of this second job ⁷	
40.	How many hours per day does <u>usually</u> work at this job?	Other	
	1 hrs min. OR It varies 20	50. Interview: Proxy 1 Non-proxy	20

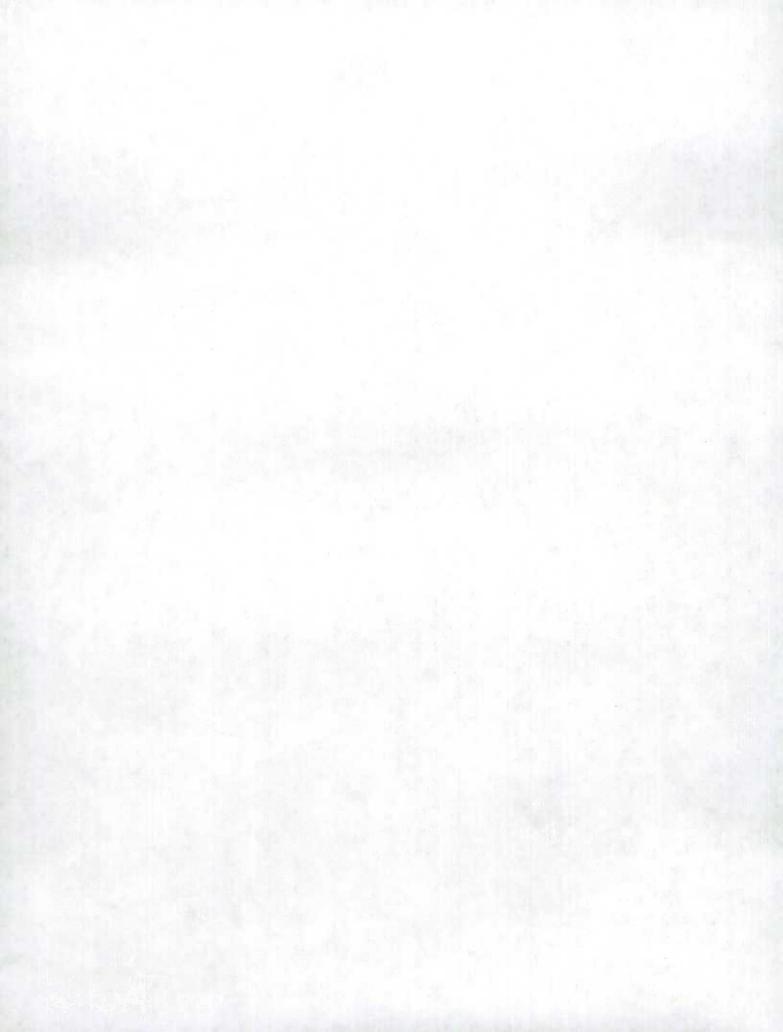
8-5103-265.1

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APPENDIX A

SPECIAL SURVEYS GROUP
LIST OF SURVEYS

1976-1991



Year	Month	Survey Title	Cost of Microdata File
1991			
	November	Survey of Work Arrangements	\$500
	August	Survey on Ageing and Independence	\$500
	April-October	Federation of Saskatchewan Indian Nations	N/A
	May	1991 Household Facilities and Equipment Survey	\$1,000
	May	Household Environment Survey	N/A
	April	Survey of Consumer Finances	\$1,000
	March	Survey of Job Opportunities	\$500
	March	1990 Shelter Cost Survey	N/A
	March	1990 Housing Repair and Renovation Survey	N/A
	March	Follow-up of 1986 Graduates Survey	\$1,000
	February	Current Population Profile	\$500
	February	Absence From Work Survey 1991	\$500
	January	Canadian Travel Survey	\$500
	JanFeb.	Labour Market Activity Survey	\$1,000
	Jan1 60.	Labour Market Activity Survey	\$1,000
1990			
	Oct. to Feb. '91	Ontario Mental Health Survey	N/A
	Jan. to Nov.	Ontario Health Survey	Ont. Min.
			of Health
	November	Adult Education and Training Survey	\$600
	September	Households and the Environment Survey	\$1,000
	June	Health Promotion Survey	\$1,000
	May	Household Facilities and Equipment Survey	\$1,000
	April	Survey of Consumer Finances	\$1,000
	April/July/	Canadian Travel Survey	\$300
	October	Company of the second of the s	
	March	National Apprenticeship Survey	\$1,000
	March	Housing Repair and Renovation Survey	N/A
	March	Smoking Habits Survey	\$1,000
	February	Absence From Work Survey	\$300
	January	Labour Market Activity Survey	\$1,000
	Monthly	Food Expenditure Survey	N/A
1989			
1707	November	National Apprenticeship Survey	\$1,000
	October	Survey of Literacy Skills Used in Daily Activities	\$1,000
	October	Alberta Apprentice/Journeymen and Work	\$500
	Octobel	Reduction Survey	\$300
	June	Barriers to Advancement in the Public Service	N/A
	May	Households Facilities and Equipment Survey	See SCF
	April	Survey of Consumer Finances	\$800
	April	Survey of Pacific Costs and Earnings	N/A
	March	Survey of Job Opportunities	\$300
	March	National Alcohol and Drug Survey	\$1,000
	March	Housing Repair and Renovation Survey	N/A
	February	Survey of Pacific Fishermen	N/A
	February	Survey of Atlantic Fishermen	N/A N/A
	1 coruary	Survey of Atlautic I isnermen	14/27

Year	Month	Survey Title	Cost of Microdata File
1989 - 0	Concluded		
	January	Canadian Travel Survey	\$300
	January	Labour Market Activity Survey	\$1,000
		along it in the part of the	
1988	November	Survey on Telephone Services	\$300
	November	Health and Employment Survey	N/A
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	National Child Care Survey	\$1,000
	May	The Household Facilities and Equipment Survey	See SCF
	May	1988 Veterans Survey	See SCF
		Canadian Travel Survey	\$300
	April/July/ October	Canadian Travel Survey	3300
	April	Survey of 1986 Graduates	N/A
	April	Survey of Consumer Finances	\$800
	March	Survey of Job Opportunities	\$300
	March	Survey on Drinking and Driving	\$500
	March	Shelter Cost Survey	See SCF
	February	Absence From Work Survey	\$300
	February	Survey of The Importance of Wildlife to Canadians	\$500
	January	Labour Market Activity Survey	\$1,000
1987			
2701	Monthly	Fuel Consumption Survey	N/A
	November	Canada Pension Plan Survivors Beneficiaries Survey	N/A
	November	Canada Pension Plan Disability Beneficiaries Survey	N/A
	November	Health and Activities Survey	N/A
	November	Current Population Profile	\$500
	October	Survey of Volunteer Activity	\$500
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	Survey of Full-time Employees Concerning Part- time Employment	N/A
	September	Part-time Employment Evaluation	N/A
	April	Ontario Child Health Follow-up Survey	N/A
	March	Follow-up of 1982 Graduates	\$500
	March	Survey of Job Opportunities	\$300
	February	Absence From Work Survey	\$300
	January	Labour Market Activity Survey	\$1,000
	January	Canadian Travel Survey	\$300
1986			
1700	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Smoking Habits	\$500
	November	Survey of Self Employed	\$500
	October	Yukon Travel Survey	N/A
	October	Health Promotion Survey (Montreal)	\$500
	October	Survey of Apprentices and Journeymen in Alberta	\$500
		Ontario Tourism and Motivation Study	\$500
	September		
	May	Survey of Pacific Cost and Earnings	N/A

Year	Month	Survey Title	Cost of Microdata File
1986 - (Concluded		
	April/May	Census Awareness Survey	N/A
	April	Survey of Pacific Fishermen	N/A
	April/July/	Canadian Travel Survey	\$300
	October		
	March	Survey of Job Opportunities	\$300
	February	Absence From Work Survey	\$300
	February	Adult Training Survey	\$500
	January	Survey of Displaced Workers	\$500
1005			
1985	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Annual Work Patterns (1985)	\$300
	October	Survey of Apprentices and Journeymen in Alberta	\$500
	September	General Social Survey (Phase 1) (Health and Social	
	Зергешое :	Support)	14/2%
	September	Survey of Disentitled Family Allowance Recipients	N/A
	July	Airport Official Languages	N/A
	June	Health Promotion Survey	\$500
	June	Survey of Work Reduction	\$500
	March	Survey of Job Opportunities	\$300
	March	Survey of Educational Attainment	\$500
	February	Survey of Maternity Leave	\$500
	February	Absence From Work Survey	\$300
	February	Survey of Atlantic Fishermen	N/A
	January	Canadian Travel Survey	\$300
	January	Survey of Annual Work Patterns (1984)	\$300
1984			
1704	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Union Membership	\$1,000
	November	Travel to Work Survey	\$300
	September	Survey of Job Opportunities	\$300
	August	Vehicle Maintenance Survey	N/A
	August	Canadian Transport Commission Survey	N/A
	June	National Graduates Survey	N/A
	June	The Canadian Health and Disability Survey	N/A
	May	Transportation Survey for Special Care Facilities	N/A
	April/July/	Canadian Travel Survey	\$300
	October		
	March	Survey of Job Opportunities	\$300
	March	Postsecondary Student Survey	N/A
	February	Vehicle Maintenance Survey	N/A
	February	Family History Survey	\$1,000
	February	Absence From Work Survey	\$300
	4	Adult Education Survey	

Year	Month	Survey Title	Cost of Microdata File
1983			
2700	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Smoking Habits	\$300
	December	Survey of Annual Work Patterns	\$300
	November	Travel to Work Survey	\$300
	October	Canadian Health and Disability Survey	N/A
	September	Tourism Attitude and Motivation	\$500
	August	Special Needs in Public Transportation Survey	N/A
	March	Survey of Job Opportunities	\$300
	February	Absence From Work Survey	\$300
	January	Canadian Travel Survey	\$300
	Jan./March	The Ontario Child Health Survey	N/A
1982			
	Monthly	Fuel Consumption Survey	N/A
	December	Survey of Annual Work Patterns	\$300
	November	Travel to Work Survey	\$300
	September	Education Survey	N/A
	August	Current Population Profile	\$500
	April/July/	Canadian Travel Survey	\$300
	October March	Survey of Job Opportunities	\$300
	March	Survey of Skills and Training	N/A
	February	Survey on The Value of Wildlife to Canadians	\$300
	February	Absence From Work Survey	\$300
	January	Survey of 1981 Work History	\$500
	January	Crime Survey (7 City)	\$1,000

Prices for the following surveys will be dependent on the cost of reproduction.

1981		
	Monthly	Passenger Car Fuel Consumption Survey
	December	Smoking Habits Survey
	November	Travel to Work Survey
	January/April/	Canadian Travel Survey
	October	
	April	Job Separation Survey
	March	Survey of Job Opportunities
	February	Survey of Child Care
	February	Absence From Work Survey
	January	Annual Work Patterns Survey
1980		
	Monthly	Passenger Car Fuel Consumption Survey
	December	Current Population Profile
	November	Travel to Work Survey
	June	Survey of Student Finances

Year	Month	Survey Title	Cost of Microdata File
1980 - 0	Concluded		
	April/July/	Canadian Travel Survey	
	October		
	March	Survey of Job Opportunities	
	February	Survey of Volunteer Workers	
	February	Absence From Work Survey	
	January	Annual Work Patterns Survey	
1979			
	Monthly	Passenger Car Fuel Consumption Survey	
	from July		
	December	Smoking Habits Survey	
	November	Travel to Work Survey	
	January/April/	Canadian Travel Survey	
	July/October		
	April	Labour Market Comparison Study	
	March	Survey of Job Opportunities	
	February	Absence From Work Survey	
	January	Annual Work Patterns Survey	
	January	Greater Vancouver Crime Survey	
	,		
1978			
	November	Travel to Work Survey	
	October	Canadian Travel Survey	
	September	Attitudes About Surveys	
	June	Survey of 1976 Graduates of Post-Secondary P	rograms
	June	Hamilton-Wentworth Victimization Survey	
	March	Survey of Job Opportunities	
	February	Absence From Work Survey	
	February	Survey of Leisure Time Activities Reading Ha	bits
	January	Annual Work Patterns Survey	
1977			
	December	Smoking Habits Survey	
	November	Travel to Work Survey	
	October	Methods Test	
	October	Weeks Worked Since September 1976	
	June	Travel Survey	
	May to	Student Identification	
	September		
	March	Survey of Job Opportunities	
	February	Absence From Work Survey	
	January	Annual Work Patterns Survey	
1976			
	November	Travel To Work Survey	
	October	Physical Recreation and Sport	
	August	Guns/Ownership Survey	
	June	Census Micro Match	

Year	Month	Survey Title	Cost of Microdata File
1976 - 0	Concluded		
	May	Household Facilities and Equipment Survey	
	April	Survey of Consumer Finances	
	February	Absence From Work/Annual Work Patterns	
	January	Income Screen Survey	

APPENDIX B

QUESTIONNAIRES AND
CODE SHEETS

	Docket No. 2	Survey de	3	Assarras	ESTIONNAL			FRANÇAIS AU VERSO
	HRD page - Ime No. Green name		Mo. Yr.		Surrame	1_1		1 romino U
	5 6	100			7	1		Deck were
0	LAST WEEK, DID WORK AT A JOB OR BUSINESS? (Regardless of the number of hours.)	30	NESS AT WHICH HE	HAVE A JOB	OR BUSI- T WORK?	50	HAS EVER WORKED	AT A JOB OR BUSINESS?
1	PERMANENTLY JUNEOUS TO WORK GO TO 50 DID HAVE MORE THAN ONE JOB OR	31	LAST WEEK, DID	HAVE A JOB		51		RK AT A JOB OR BUSINES
1	BUSINESS LAST WEEK?	32	COUNTING FROM TO	HE END OF LA	DOT A MARK THAT	Not	1, >	Mo. Ye
2	WAS THIS A RESULT OF CHANGING EMPLOYERS LAST WEEK?		WORK AT HIS/HER	NEW JOB?	į	52	TO FE STATE OF COMMENTS	
3	HOW MANY HOURS PER WEEK DOES	33	WHY WAS ABSE WEEK?	Enter code		53		30 OR MORE HOURS PER
	(Main) JOB? if soal 30 or more go to 15	34	DID HAVE MORE BUSINESS LAST WE	THAN ONE JO EK?		50	WEEK?	Part-time 2 Accept the
1	WHAT IS THE REASON USUALLY WORKS LESS THAN 30 HOURS PER WEEK?	35	HOW MANY HOURS USUALLY WORK AT	PER WEEK D	DES	54	per week?	EASON WHY LEFT THAT
5	LAST WEEK, HOW MANY HOURS OF OVERTIME OR EXTRA HOURS DID		(Mem) JOS7	// ann	more (i	55	Cabon has been any many many paperant to you at a	
	WORK? Include baid and unpaid If none Item at will cost enter 00	36	Other jobs? WHAT IS THE REASO LESS THAN 30	N . USUALL	2	56	The second second	HAS LOOKED FOR WO
)	LAST WEEK, HOW MANY HOURS WAS AWAY FROM WORK FOR ANY REASON? (Holiday vacation, illness, labour dispute, etc.)		HOURS PER WEEK?	Enter code			Yes ¹	No Go to 64
	From all roos; if rone enter 00 and go to 18	37	UP TO THE END OF LA WEEKS HAS BEEN FROM WORK?	ST WEEK, HOW	MANY ABSENT	57	IN THE PAST 4 WEEKS WORK? (Mark all methods)	WHAT HAS DONE TO I
	WHAT WAS THE MAIN REASON FOR BEING AWAY FROM WORK?	38	IS GETTING ANY FROM HIS/HER EMP OFF LAST WEEK?	WAGES OR SALOYER FOR AL	ALANY NY TIME		TO FIND WORK? Mark all of For each method given, ask	. HAS DONE ANYTHING
-	HOW MANY HOURS DID ACTUALLY WORK LAST WEEK AT HIS/HER:	89	ATTERVENER CHECK THE	10	·O.	Che	* WHEN DID LAST	pear method) Allo, of week Method ago jevol. used any week
	(Main) JOB? Other jobs?		And a second second and a	2 2			PUBLIC employment AGENCY PRIVATE employment AGENCY	· · · · · · · · · · · · · · · · · · ·
	IN THE PAST 4 WEEKS, HAS LOOKED FOR ANOTHER JOB?	40	IN THE PAST 4 WEEK ANOTHER JOB?	0			UNION	
			Y = 10	No CO			EMPLOYERS directly	()
	- 12 in 12		G	0 10 72			FRIENDS or reserves	· O □
2	DI SCRIPTION OF MA	, govern	OR BUSINESS	person)			FRIENDS or relatives Placed or answered ADS LOOKED at job ADS	
	FOR WHOM DID WORK? /Name of business.	, govern	OR BUSINESS	person)			Placed or answered ADS LOOKED at job ADS OTHER. Specify in MOTES	· 0
	FOR WHOM DID WORK? /Name of business.	govern	OR BUSINESS	person)		58	Placed or anowhered ADS LOOKED at job ADS OTHER Speedy in MOTES UP TO THE END OF LAST HAS BEEN LOOKING F fillot counting weeks works	WEEK, HOW MANY WEEK OR WORK?
	FOR WHOM DID WORK? Alama of business.	govern	OR BUSINESS THERE dept or agency, or Mo. Yr. If ma.	person)	5	58	Placed or anowhered ADS LOOKED at job ADS OTHER Speedy in MOTES UP TO THE END OF LAST HAS BEEN LOOKING F fillot counting weeks works	WEEK, HOW MANY WEEK OR WORK? add.)
	WHEN DID START WORKING FOR THESE	MPLOYE	OR BUSINESS Trained dept or agents, pr ER? Mo. Vr. If mo.	person)	5	59	Placed or arowhered ADS LOOKED at job ADS OTHER Speechy in NOTES UP TO THE END OF LAST HAS. BEEN LOOKING F River counting weeks work WHAT WAS. 2 MAIN A STARTED TO LOOK FOR Y IS. LOOKING FOR A JO MONTHS?	WEEK, HOW MANY WEEK OR WORK? INCTIVITY BEFORE HE/SHE NORK? Empr Code 6 TO LAST MORE THAN 6
90	WHEN DED START WORKING FOR THESE	MPLOYE	OR BUSINESS Trained dept or agents, pr ER? Mo. Vr. If mo.	person)	5	59	Placed or answered ADS LOOKED at job ADS OTHER Specify in MOTES UP TO THE END OF LAST HAS. BEEN LOOKING F Place Counting weeks work WHAT WAS 9 MAIN A STARTED TO LOOK FOR Y IS. LOOKING FOR A JO MONTHS? Yes. (More there &	WEEK, HOW MANY WEEK OR WORK? MCTIVITY BEFORE HE/SHE NORK? Emer Code 6 TO LAST MORE THAN 6
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Code Sheet



Labour Force Survey Questionnaire (Form 05)

Exemplaire fr disponible su

Own illness or disability

Personal or family responsibilities

Going to school

Could only find part-time work

Did not want full-time work 36

Full-time work under 30 hours per week

Other - Specify in NOTES

Own illness or disability

Personal or family responsibilities

3 Weather

Labour dispute (strike or lockout)

Layoff, expects to return (Paid Workers Only)

New job started during week, or job terminated (does not expect to return)

Vacation

Holiday (legal or religious)

9 Working short-time (because of material shortages, plant maintenance or repair, etc.)

Other - Specify in NOTES

Own illness or disability

2 Personal or family responsibilities (Include maternity leave)

Weather

Labour dispute (strike or lockout)

Temporary layoff, expects to return (Paid Workers Only)

New job to start in the future

Vacation

Seasonal Business (Excl. Paid Workers)

Other - Specify in NOTES

Own illness or disability

Personal or family responsibilities

Include: Marriage, pregnancy, trip, vacation, family illness, etc.

Going to school

Quit job for no specific reason

Lost job or laid off job (Paid Workers Only) Include: Seasonal job, on-call arrange-

ment, temporary job, dismissal (fired), company moved or went out of business, economic con-

54 ditions, etc.

6 Changed residence Dissatisfied with job

Include: Low pay, poor hours, transportation problems, working conditions, conflict with employer or co-workers, no opportunity for advancement, etc.

Retired

0 Other - Specify in NOTES

Working 59

Keeping house 3 Going to school

Other - DO NOT specify in NOTES

Own illness or disability

Personal or family responsibilities

Going to school

No longer interested in finding work

Waiting for recall (to former job)

62 Has found new job

Waiting for replies from employers

Believes no work available (in area, or suit to skills)

No reason given

Other - Specify in NOTES

Yes, because of:

Own illness or disability

Personal or family responsibilities

63 Going to school

Already has a job

Other - Specify in NOTES

No (Was available for work)

.. 'S JOB, WAS HE/SHE A PAID WOR ER, SELF-EMPLOYED OR AN UNPA **FAMILY WORKER?**

"IN . . . 'S OTHER JOB, WAS HE/SHE A PA WORKER, SELF-EMPLOYED OR AN UNPA FAMILY WORKER?"

Worked for Others

Paid Worker

76

82

2 Unpaid family worker

Self-employed

Incorporated business - With paid help

Incorporated business - No paid help

Not incorporated business - With paid he

Not incorporated business (Include se employed without a business) - No paid he

Primary or secondary school

Community college, junior college, or CEGE

3 University

Other - Specify in NOTES

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Code Sheet

Household Record Docket (Form 03)



Exemplaire français disponible sur disponible

1 Single Detached 2 Double 3 Row or Terrace 4 Duples 5 Low-Rise Apartment (less than 5 stories) or Flat 6 Hotel-Rise Apartment (is stories or more) 7 Institution 8 Hotel Rises Apartment (is stories or more) 9 Hotel Rises Apartment (is stories or more) 1 Hotel Rises Apartment (is stories or more) 2 Separate (in the Institution) 2 Separated or divorced 3 Hotel Rises Apartment (is stories or more) 2 Rises Apartment (is stories or more) 3 No one is home (in the Institution) 3 No is stories or stories and is stories	-						
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B High-Rise Apartment (5 stores or more)	1	5	Low-Rise Apartr	ment (less than 5 stories) or Flat	1 3	Household member 70 years of age and ov	rer (non-
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Now married of North continues					R		15/22
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