

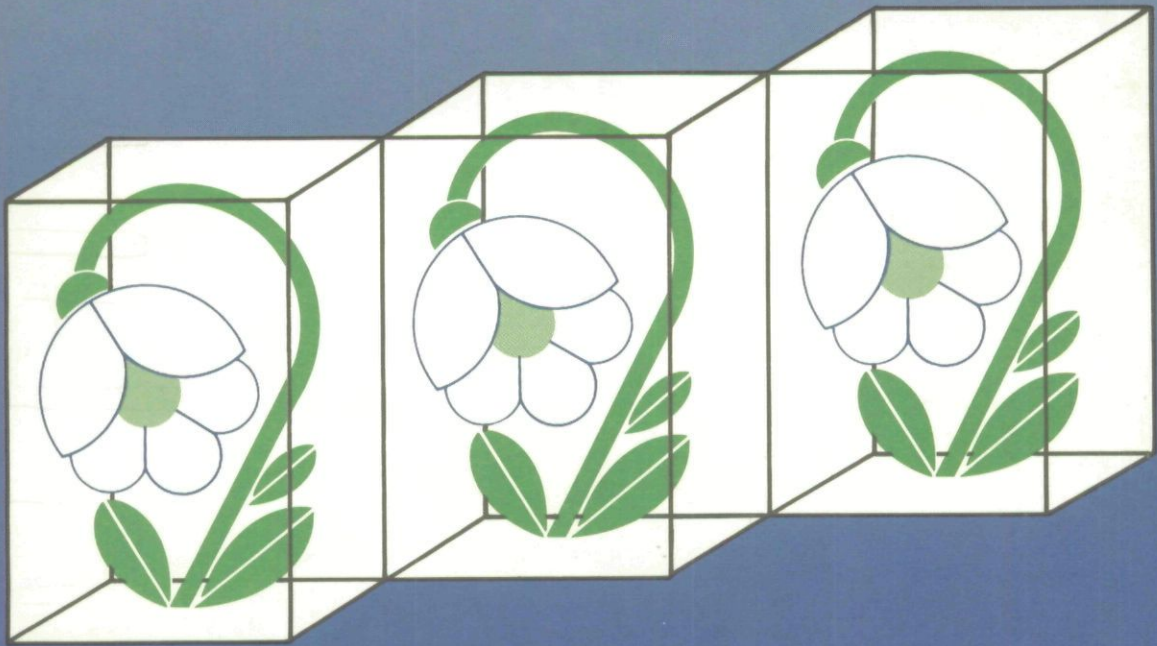
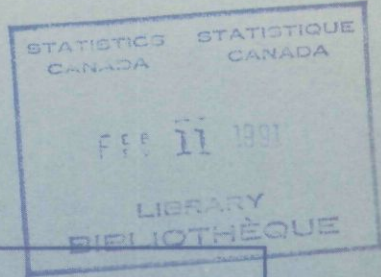
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# Leisure and lifestyles of persons with disabilities in Canada

Special topic series

The health and activity limitation survey

4



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**4**

# **Leisure and Lifestyles of Persons with Disabilities in Canada**

Special Topic Series from  
The Health and Activity Limitation Survey

ISSN 1180-4610

**Prepared by:**

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of Industry, Science and Technology

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## Preface

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The **Health and Activity Limitation Survey (HALS)** conducted in 1986 and 1987 provides a comprehensive picture of persons with disabilities in Canada. The survey covered persons with disabilities residing in both households and health-related institutions.

This report is part of the **Special Topic Report Series** which provides overviews of a wide variety of subjects included in **HALS**. The series has been written by experts, both inside and outside Statistics Canada, in non-technical language supported by simple tables and charts.

This report titled "**Leisure and Lifestyles of Persons with Disabilities in Canada**" is the fourth in the series of nine reports. It highlights the recreation and lifestyles of persons with disabilities aged 15 and older residing in households. This report was authored by Jean-Pierre Morin and Mylène Lavigne, Social Survey Methods Division, Statistics Canada.

I would like to express my appreciation to the authors, to the reviewers and to the staff of Statistics Canada involved in managing and producing this series.

We hope that the reports in the **Special Topic Reports Series** will not only provide Canadians with very useful information on the issues facing persons with disabilities, but will also be an inducement for them to undertake further research on this topic.

Ivan P. Fellegi  
Chief Statistician of Canada



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## Highlights of the Study

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- Almost 98% of the 2,794,550 disabled adults in Canada watch television, listen to the radio or records, or read at least one hour per week. The majority of these individuals engage in these activities more than seven hours per week.
- Forty-eight percent of disabled Canadians aged 15 and over perform no physical activity during their leisure time. The proportion of "active" disabled individuals is far lower than that of "active" Canadian adults in general. However, 30% reported that they participate in physical activity three or more times per week.
- Slightly over 33% of adults with disabilities are smokers - virtually the same proportion as that obtained for the Canadian adult population in recent Statistics Canada surveys.
- Young adults with disabilities are more likely to be smokers than are young Canadian adults in general, while there is no significant difference among seniors.
- An estimated 43% of those with disabilities consume alcohol at least once a month as compared to 63% of the general population; the distribution varies widely by sex and age. Only 5% of the disabled population are "regular" drinkers, that is, they have at least one drink per day.
- Alcohol consumption increases with income and education, in contrast to the pattern for smoking. This is similar to smoking and drinking patterns in the general population.
- Nearly 44% of those with disabilities consider their eating habits "excellent or very good", while approximately 50% consider them "good or fair" and 5% "poor".
- Canadians with disabilities tend to live in smaller households (that is, fewer members) than do Canadians in general. In both the disabled population and the total Canadian population, household size diminishes considerably with age and differs significantly between the sexes, particularly among seniors. Overall, 19% of the disabled population live alone.
- Approximately 46% of the disabled population need help with heavy household chores, followed by shopping (23%), general housework (22%), management of personal finances (14%) and, finally, meal preparation (12%). The need for help increases with age and varies between the sexes, depending on the type of activity. Help is primarily provided by a spouse or relative.



# 1. Introduction

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This Special Topic report presents data from the **Health and Activity Limitation Survey (HALS)** which was a survey of persons with disabilities. It was conducted in households in the fall of 1986 and in health-related institutions in the spring of 1987. HALS was undertaken as part of Statistics Canada's ongoing commitment to build and maintain a national database on disability.

The target population of **HALS** consisted of all persons with a physical or psychological disability who were living in Canada at the time of the 1986 Census. Notably, this includes residents of all provinces and both territories, persons living on Indian reserves, and permanent residents of most collective dwellings and health-related institutions. Details on the sample design are provided in this publication under Sample Design.

The type of data gathered include the nature and severity of disability and the barriers which disabled persons encounter in all aspects of their daily activities.

HALS found that, in 1986, there were a total of 3.3 million persons with disabilities in Canada, of which 92% resided in households.

## Persons with Disabilities by Place of Residence and Age Group

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	Disabled Persons		
	Total	In Households	In Institutions
All ages	3,316,870	3,069,595	247,275
0 to 14 years	277,445	275,045	2,395
15 years and over	3,039,430	2,794,550	244,880

---

This report entitled "**Leisure and Lifestyles of Persons with Disabilities in Canada**" highlights the recreation and lifestyles of the 2,794,550 adults (aged 15 and older) with disabilities who were residing in households. It is based on the responses to Sections C and H of the questionnaire administered to adults; both sections are presented in Appendix A.

This report is the fourth in a series of nine special topic reports.

## 2. Cultural Activities

---

### Introduction

The Health and Activity Limitation Survey collected data concerning participation in cultural activities at home and outside the home. This information is useful in the assessment of the quality of life enjoyed by persons with disabilities. Questions H1 through H4 in section H of the questionnaire (see Appendix A for a copy of the questions) asked about four specific cultural activities performed in the home and eight activities outside the home. It should be noted that "cultural" is interpreted in a broad sense and includes such activities as talking on the telephone, visiting friends, shopping, etc. The data collected include the frequency of participation and the barriers encountered by those individuals who would like to participate more.

### Highlights

- The most popular group of cultural activities done at home is watching television, listening to radio, records or tapes, and reading.
- Visiting friends or relatives is the most popular cultural activity outside the home; shopping is a close second.
- The majority of disabled adults are satisfied with the frequency of their participation in cultural activities outside the home.
- Physical inability to do more is the obstacle most frequently reported by disabled adults who are dissatisfied with the frequency of their cultural activities.

### Results

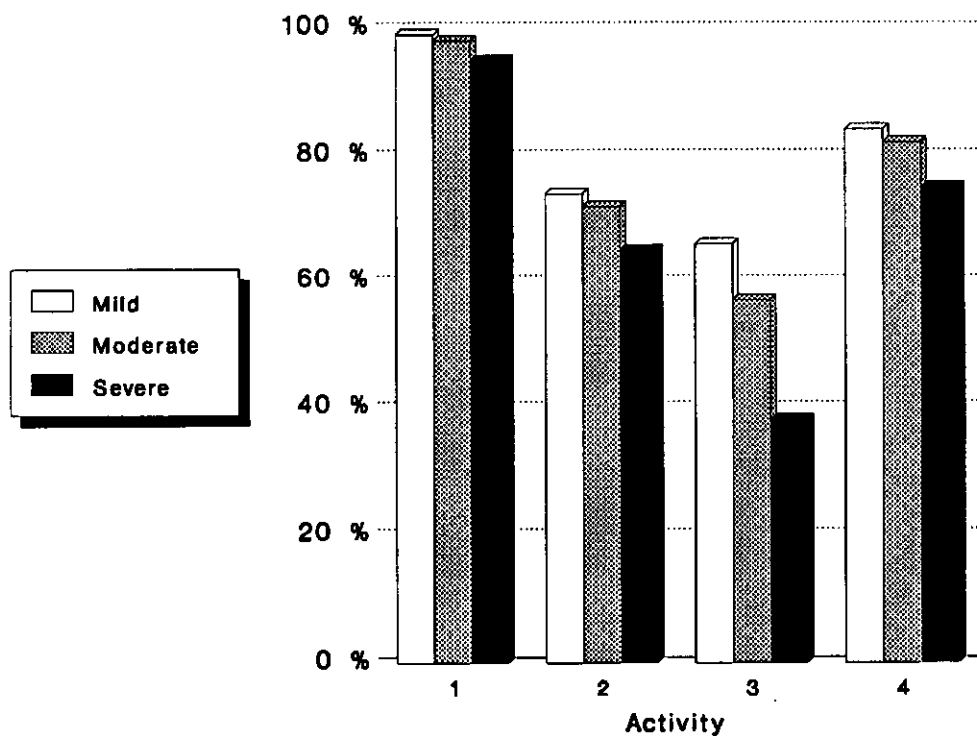
Almost 98% of the 2,794,550 disabled adults in Canada watch television, listen to the radio or records, or read at least one hour per week. The majority of these individuals engage in these activities more than 7 hours per week. Approximately 72% of the disabled adult population talk on the telephone at least one hour per week, 57% do arts, crafts, gardening or other hobbies and 82% participate at least one hour per week in social activities with family or friends. In general, these leisure activities involve from 1 to 7 hours per week (Table 1). (Although there is no significant difference when comparing age groups, younger people tend to participate more frequently than the older population.)

**Table 1. Percentage of Persons with Disabilities Aged 15 and Over by Frequency of Participation in Certain Cultural Activities at Home, Canada**

Cultural Activity	Weekly Frequency			
	0 Hours	1 - 7 Hours	8 Hours or More	Not Reported
Watching television, listening to radio, records, or reading	2.1	28.0	69.7	0.3
Talking on the telephone	28.0	64.3	7.4	0.3
Arts, crafts, gardening or other hobbies	42.5	38.0	19.2	0.4
Social activities with family or friends	18.0	60.4	21.3	0.3

As shown in Figure 1, the percentage of the disabled adult population participating in cultural activities at home decreases as the degree of disability increases, particularly in the area of arts, crafts, gardening and other hobbies.

**Figure 1. Persons with Disabilities Aged 15 and Over Participating at Least One Hour per Week in Cultural Activities at Home by Degree of Disability, Canada**



**Activity 1: Watching television, listening to radio or records, or reading;**

**Activity 2: Talking on the telephone;**

**Activity 3: Arts, crafts, gardening or other hobbies;**

**Activity 4: Social activities with family or friends.**



The cultural activities outside the home in which disabled persons participate most often are visiting friends or relatives and shopping. Over 80% of the disabled population participate in these activities at least once a month (Table 2). For each activity listed, the percentage who report participating one to four times per month is higher than those participating five times or more.

**Table 2. Percentage of Persons with Disabilities Aged 15 and Over by Frequency of Participation in Certain Cultural Activities Outside the Home, Canada**

Cultural Activity	Monthly Frequency			
	Never	1 - 4 Times	5 Times or More	Not Stated
Visiting friends or relatives	12.7	56.3	30.5	0.5
Attending sporting events, concerts, plays or movies	65.9	28.1	5.5	0.5
Going to museums, historic sites, libraries or art galleries	77.4	19.6	2.0	1.0
Taking courses, attending seminars	88.6	7.8	2.5	1.1
Shopping	16.0	51.1	32.3	0.6
Attending religious activities or doing volunteer work	55.6	31.6	12.1	0.7
Visiting national or provincial parks	77.5	20.1	1.7	0.7
Other activities such as going to bingos or clubs, or playing cards	66.1	24.4	8.8	0.7

Table 3 indicates that as age increases, the percentage of the disabled adult population participating in cultural activities outside the home decreases, by varying extents depending on the type of activities. Attending religious activities is the only exception. Similarly, Table 4 shows that as the severity of disability increases, participation in cultural activities outside the home decreases.

**Table 3. Persons with Disabilities Aged 15 and Over Participating at Least Once per Month in Cultural Activities Outside the Residence by Age Groups, Canada**

Cultural Activity	All Ages	Age Group			
		15 to 24 Years	25 to 44 Years	45 to 64 Years	65 Years and Over
Total disabled adults	2,794,550	181,325	623,790	962,525	1,026,915
% reporting...					
Visiting friends	86.8	94.9	93.5	87.3	81.0
Attending sporting events	33.6	68.3	52.9	29.7	19.4
Going to museums	21.5	29.2	28.2	20.5	16.9
Taking courses	10.3	22.7	22.1	7.7	3.3
Shopping	83.4	88.6	88.2	86.1	77.1
Attending religious activities	43.8	36.3	42.4	43.6	46.0
Visiting parks	21.8	32.9	32.5	20.7	14.3
Other activities	33.2	40.1	34.4	32.3	32.0

\* \* \* \*

**Table 4. Persons with Disabilities Aged 15 and Over Participating at Least Once per Month in Cultural Activities Outside the Residence by Severity Level, Canada**

Cultural Activity	Total, All Levels	Severity Level		
		Mild	Moderate	Severe
Total disabled adults	2,794,550	1,286,160	964,880	543,510
% reporting...				
Visiting friends	86.8	92.1	87.9	72.6
Attending sporting events	33.6	44.6	29.4	15.0
Going to museums	21.5	27.3	19.9	10.4
Taking courses	10.3	14.0	9.0	3.6
Shopping	83.4	90.1	85.2	64.5
Attending religious activities	43.8	48.8	43.5	32.3
Visiting parks	21.8	27.2	20.3	11.3
Other activities	33.2	37.8	33.3	22.0

Table 5 provides information on the satisfaction of the disabled adult population with their participation in cultural activities outside the residence for various age groups. Almost 67% of the disabled adult population are satisfied. The lowest percentage of people who are satisfied (57%) is reported in the 25 to 44 age group. Excluding this age group, the percentage increases with age: 61% for disabled persons aged 15 to 24, 65% for those aged 45 to 64 and 75% for those aged 65 and over.

**Table 5. Persons with Disabilities Aged 15 and Over by Satisfaction with Participation in Cultural Activities Outside the Residence by Age Groups, Canada**

Age Group	Total Disabled Adults	Satisfaction with Participation in Activities Outside the Residence		
		Satisfied	Would Like to do More %	Not Stated
All ages	2,794,550	66.7	32.9	0.4
15 to 24 years	181,325	60.7	38.9	0.5*
25 to 44 years	623,790	57.3	42.5	0.2*
45 to 64 years	962,525	64.9	34.4	0.7
65 years and over	1,026,915	75.1	24.6	0.3

The more severe the disability, the less likely individuals are to be satisfied with the frequency of their participation in cultural activities (Table 6). However, regardless of the severity of disability, whether mild, moderate or severe, the majority are satisfied with the frequency of cultural activities (mild disability: 74%, moderate disability: 66% and severe disability: 51%).

**Table 6. Persons with Disabilities Aged 15 and Over by Satisfaction with Participation in Cultural Activities Outside the Residence by Severity of Disability, Canada**

Severity Level	Total Disabled Adults	Satisfaction with Participation in Activities Outside the Residence		
		Satisfied	Would Like to do More %	Not Stated
Total	2,794,550	66.7	32.9	0.4
Mild	1,286,160	73.6	25.9	0.6
Moderate	964,880	66.1	33.7	0.2
Severe	543,510	51.4	48.3	0.3*

Although the tables are not included in this report, it was noted that:

- There is no significant difference in satisfaction with participation in cultural activities on the basis of income; and
- 69% of the adult disabled population living in rural areas are satisfied with their participation in these cultural activities, compared to 66% of the disabled adult population living in urban areas.

Finally, it is interesting to review the data on the obstacles encountered by disabled adults dissatisfied with the frequency of their participation in cultural activities. Table 7 provides the information obtained on obstacles to increased frequency of cultural activities by age group. Physical inability to do more is the obstacle most frequently reported (55%) by disabled adults dissatisfied with the frequency of their cultural activities. It is also noted that this obstacle increases with age and degree of disability.

Almost 28% of the disabled adult population indicate that high cost prevents further participation in cultural activities. For the age groups 15 to 24, 25 to 44 and 45 to 64, the percentage selecting this obstacle is relatively stable (32%, 32% and 31% respectively). However, this percentage drops to 17% for individuals 65 and over.

**Table 7. Persons with Disabilities Aged 15 and Over Dissatisfied with Frequency of Participation in Cultural Activities Outside the Residence by Age Groups by Obstacles Preventing Increased Participation, Canada**

Obstacle <sup>1</sup>	Age Group				
	All Ages	15 to 24 Years	25 to 44 Years	45 to 64 Years	65 Years and Over
<b>Total disabled adults wanting increased participation in activities</b>	<b>920,345</b>	<b>70,500</b>	<b>265,210</b>	<b>331,550</b>	<b>253,085</b>
<b>% reporting...</b>					
Need someone's help	10.9	10.2	6.6	8.0	19.5
Need special aid	3.1	1.5*	1.6	3.1	5.3
Inadequate transportation	9.4	13.4	6.6	7.9	13.4
Location too far away	13.2	11.5	12.5	12.7	15.0
Facilities not suitable	7.0	9.7	5.6	6.6	8.2
Physically unable to do more	54.9	33.9	43.4	58.5	68.1
Cost too high	27.6	32.4	32.1	30.7	17.3
Other	29.0	38.8	38.3	27.9	17.8

<sup>1</sup> Percentages will not total 100% for any age group because each person may identify more than one obstacle.

## **Comparison and Discussion of Results**

Participation in cultural activities is a major indicator of an individual's well-being. The majority of disabled individuals aged 15 and over are satisfied with the frequency of their participation in cultural activities. However, dissatisfaction increases with the degree of severity, the predominant obstacle to satisfaction being physical inability to do more.

Unfortunately, it is difficult to compare the data for disabled Canadians aged 15 and over with those for the general Canadian population 15 and over. No previous survey results are truly comparable. There is the Survey of Fitness, Physical Recreation and Sport, conducted 10 years previous to HALS (October 1976). These results should be used only as guidelines for certain activities. There is also the 1981 Canadian Time Use Pilot Study. While the results of this pilot study cannot be generalized and applied to the entire population of Canada, the data do provide some information on certain activities.

For instance, on the basis of these two surveys, it can be established that the group of cultural activities done in the home including watching television, listening to radio or records, and reading is very popular with the Canadian population 15 and over, as it is with the disabled population. The October 1976 survey reveals that visiting friends or relatives is also one of the most frequently reported cultural activities outside the home for the Canadian adult population. However, sufficient data are not available to determine whether the total adult population performs certain activities more than disabled adults, or vice versa.

### **3. Physical Activities**

---

#### **Introduction**

The data on physical activities were collected in section H (questions H5 through H8) of the Health and Activity Limitation Survey questionnaire. The questions asked about the physical activities, sports or exercises that disabled adults participate in during their leisure time; for example - walking, jogging, swimming or bicycling. The information collected deals not only with the frequency of such activity but also with the desire to participate in more physical activities. Disabled persons wanting to participate in more physical activities were asked to indicate the obstacles preventing them from doing so (maximum of three obstacles).

#### **Highlights**

- Approximately 48% of disabled adults never participate in physical activities.
- Thirty percent of disabled adults report that they participate in physical activity three or more times per week.
- There is no marked difference in the levels of participation between men and women.
- The proportion of disabled persons who do not participate in any physical activity increases with age and with severity of disability but decreases with educational level.
- The proportion of disabled adults who do not participate in any physical activity is highest in Newfoundland and lowest in British Columbia.
- The majority of the disabled adult population are satisfied with the frequency of their participation in physical activities.
- Physical inability to do more is the obstacle most frequently reported by disabled adults who are dissatisfied with the frequency of their participation in physical activities.

## Results

Thirty percent of disabled adults report that they participate in physical activities three or more times per week; 14% participate in physical activities one or two times per week; 7% participate less than once per week and 48% never participate in physical activities. The differences in participation between disabled men and women are very slight. However, 45% of men do not participate in any physical activity, compared to 51% of women (Table 8).

Comparing the frequency of physical activity by province and territory, it is noted that Newfoundland has the highest proportion of disabled persons who do not participate in any physical activity (62%) and British Columbia the lowest (36%). It is also noted that, in a similar trend, 41% participate in physical activities three or more times per week or more in British Columbia, compared to 16% in Newfoundland.

**Table 8. Persons with Disabilities Aged 15 and Over by Frequency of Participation in Physical Activities by Sex for Canada, Provinces and Territories**

Sex/ Province	Total Disabled Adults	Frequency of Participation in Physical Activities				
		Never	Less Than Once per Week	1 or 2 Times per Week %	3 Times per Week or More	Not Stated
<b>Both sexes</b>						
Canada	2,794,550	47.9	7.2	14.1	29.7	1.1
Newfoundland	61,865	62.3	7.2	13.7	16.3	0.6*
Prince Edward Island	16,295	49.4	7.5	13.3	29.2	--
Nova Scotia	128,175	50.6	8.6	13.4	26.7	0.7*
New Brunswick	93,360	46.9	8.2	14.5	29.7	0.6*
Quebec	599,545	55.4	5.5	15.0	23.3	0.8
Ontario	1,069,140	49.3	7.5	12.5	29.0	1.6
Manitoba	136,115	41.3	6.8	15.7	35.1	1.1
Saskatchewan	116,715	43.5	6.3	14.4	35.3	0.6
Alberta	228,885	39.9	8.2	18.6	32.7	0.5
British Columbia	339,200	35.9	8.0	14.2	40.7	1.1
Yukon	1,695	38.9	7.4*	16.8	33.0	--
Northwest Territories	3,555	58.2	--	8.7*	29.8	--

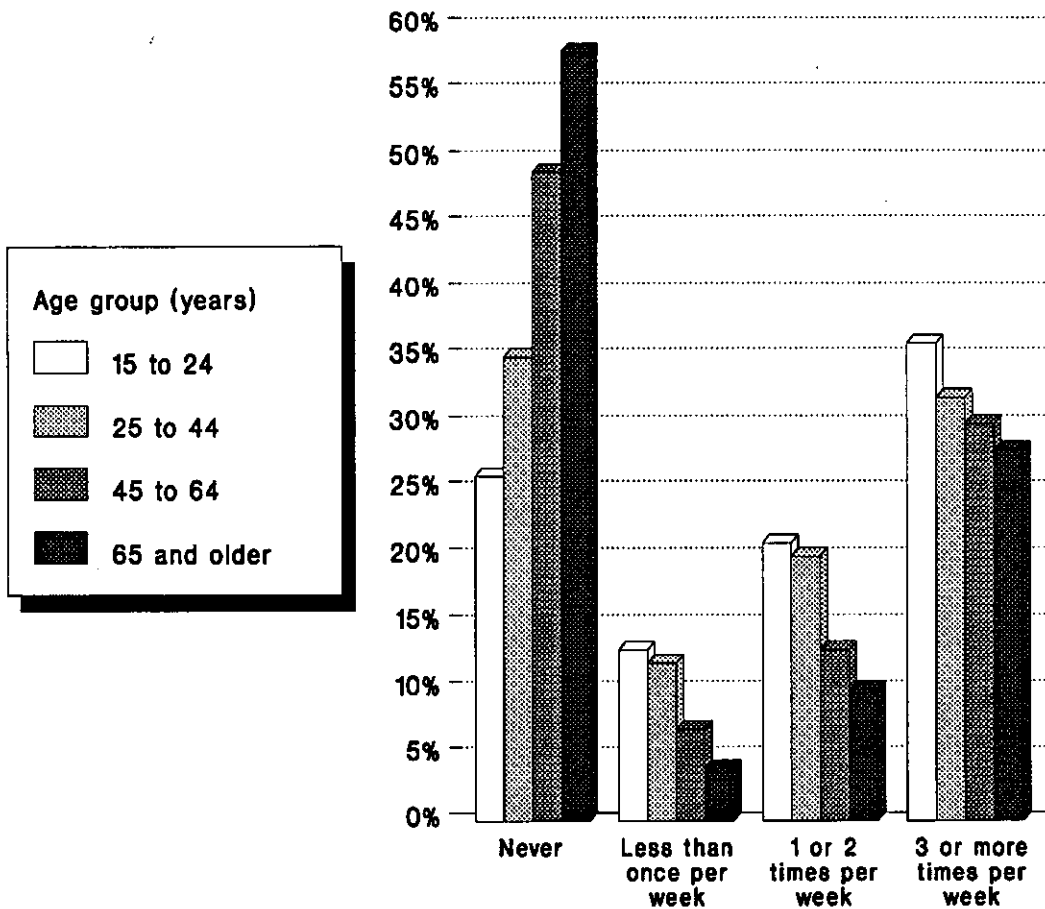
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**Table 8. Persons with Disabilities Aged 15 and Over by Frequency of Participation in Physical Activities by Sex for Canada, Provinces and Territories (concluded)**

Sex/ Province	Total Disabled Adults	Frequency of Participation in Physical Activities				
		Never	Less Than Once per Week	1 or 2 Times per Week %	3 Times per Week or More	Not Stated
<b>Males</b>						
Canada	1,326,305	44.5	7.6	14.6	32.0	1.4
Newfoundland	30,180	57.0	6.2	13.6	22.3	--
Prince Edward Island	7,610	51.1	7.0*	11.3	30.4	--
Nova Scotia	60,645	51.5	8.6	11.8	27.5	--
New Brunswick	44,655	44.2	7.9	13.7	33.7	--
Quebec	278,205	51.5	5.6	16.7	25.9	--
Ontario	506,155	45.1	8.5	13.3	30.7	2.4
Manitoba	62,265	39.0	7.7	15.0	36.9	1.3*
Saskatchewan	57,420	39.9	6.2	13.7	39.5	0.6*
Alberta	109,885	38.7	8.4	18.0	34.6	--
British Columbia	166,575	33.0	7.8	14.9	43.1	1.2
Yukon	1,050	31.9	--	21.0	34.3	--
Northwest Territories	1,660	65.7	--	--	22.9*	--
<b>Females</b>						
Canada	1,468,245	50.9	6.9	13.6	27.7	0.9
Newfoundland	31,690	67.4	8.0	13.7	10.5	--
Prince Edward Island	8,685	48.0	8.1	15.1	28.2	--
Nova Scotia	67,530	49.8	8.6	14.8	26.1	0.7*
New Brunswick	48,705	49.3	8.6	15.2	26.1	0.7*
Quebec	321,345	58.8	5.5	13.5	21.1	1.1
Ontario	562,985	53.1	6.7	11.8	27.5	0.9
Manitoba	73,850	43.2	6.1	16.3	33.5	0.9*
Saskatchewan	59,295	46.9	6.3	15.1	31.1	0.6*
Alberta	119,000	41.0	8.1	19.2	31.0	0.7*
British Columbia	172,630	38.8	8.2	13.6	38.4	1.1
Yukon	650	50.0	--	--	30.8*	--
Northwest Territories	1,895	51.7	--	--	35.6	--

**Figure 2. Persons with Disabilities Aged 15 and Over by Frequency of Participation in Physical Activities by Age Groups, Canada**



As Figure 2 indicates, physical activity declines with age. The proportion of disabled persons who do not participate in any physical activity increases considerably from one age group to the next. There is little difference between men and women within each of the age groups except in the 65 and over group. In that group, 63% of disabled women do not participate in any physical activity, compared to 52% of disabled men. Thirty-two percent of disabled men participate in physical activities more than twice a week, compared to 24% of disabled women. However, in the 15 to 24 age group, more women than men report participation.

In Table 9, it is observed that physical activity decreases as the severity of disability increases. The proportion of disabled persons not participating in physical activities increases considerably with the severity of disability, from 38% for persons who are mildly disabled to 49% for those who are moderately disabled and 69% for those who are severely disabled.

**Table 9. Persons with Disabilities Aged 15 and Over by Frequency of Participation in Physical Activities by Severity of Disability, Canada**

Severity Level	Total Disabled Adults	Frequency of Participation in Physical Activities				
		Never	Less Than Once per Week	1 or 2 Times per Week %	3 Times per Week or More	Not Stated
<b>Total</b>	<b>2,794,550</b>	<b>47.9</b>	<b>7.2</b>	<b>14.1</b>	<b>29.7</b>	<b>1.1</b>
Mild	1,286,160	38.2	8.0	17.9	34.3	1.7
Moderate	964,880	49.1	7.5	12.7	30.0	0.7
Severe	543,510	68.5	4.8	7.7	18.4	0.5

The proportion of persons who are satisfied with the frequency of their participation in physical activities increases with age (Table 10) but decreases as disability becomes more severe (Table 11). However, in general, disabled adults are satisfied with their participation in physical activities (64%).

**Table 10. Persons with Disabilities Aged 15 and Over by Satisfaction with Participation in Physical Activities by Age Groups, Canada**

Age Group	Total Disabled Adults	Satisfaction with Participation in Physical Activities		
		Satisfied	Would Like to do More %	Not Stated
All ages	2,794,550	64.4	35.3	0.4
15 to 24 years	181,325	49.7	49.8	0.5*
25 to 44 years	623,790	49.2	50.2	0.6
45 to 64 years	962,525	63.6	36.1	0.4
65 years and over	1,026,915	76.9	22.9	0.3

\* \* \* \*

**Table 11. Persons with Disabilities Aged 15 and Over by Satisfaction with Participation in Physical Activities by Severity of Disability, Canada**

Severity Level	Total Disabled Adults	Satisfaction with Participation in Physical Activities		
		Satisfied	Would Like to do More %	Not Stated
Total	2,794,550	64.4	35.3	0.4
Mild	1,286,160	69.0	30.5	0.5
Moderate	964,880	62.4	37.3	0.3
Severe	543,510	56.9	42.8	0.3

Table 12 shows that physical inability to do more is the obstacle most frequently reported (65%) by disabled persons dissatisfied with the frequency of their participation in physical activities. "Other obstacles" and "cost too high" are the next most frequent responses, with 24% and 17% respectively. The other categories each are reported by less than 10%. Physical inability to do more increases significantly with age.

**Table 12. Persons with Disabilities Aged 15 and Over Dissatisfied with Frequency of Participation in Physical Activities by Age Groups by Obstacles Preventing Increased Participation in Physical Activities, Canada**

Obstacle <sup>1</sup>	Age Group				
	All Ages	15 to 24 Years	25 to 44 Years	45 to 64 Years	65 Years and Over
<b>Total disabled adults wanting increased participation in activities</b>	<b>985,300</b>	<b>90,300</b>	<b>313,295</b>	<b>347,025</b>	<b>234,675</b>
<b>% reporting...</b>					
Self conscious/ill at ease	6.9	8.2	9.0	5.8	5.0
Lack of family support	2.9	2.7	3.4	2.2	3.5
Lack of nearby facilities	9.8	15.5	11.2	7.5	9.1
Facilities not adapted to needs	5.6	8.9	5.6	5.4	4.4
Inadequate transportation	5.0	7.6	4.3	4.2	6.0
Physically unable to do more	64.9	49.4	52.3	69.6	80.7
Cost too high	16.5	23.4	21.5	15.9	7.9
Other	24.1	26.4	32.8	23.1	13.1

*1 Percentages will not total 100% for any age group because each person may identify more than one obstacle.*

## Comparison and Discussion of Results

Any conclusions about the frequency of physical activity depend largely on the definitions used. In the 1981 Canada Fitness Survey, frequency of physical activity was defined as follows:

**Active person:** someone who has participated in a sports or fitness activity for at least 3 hours per week for at least 9 months a year.

**Moderately active person:** someone who has participated in a sports or fitness activity for less than 3 hours per week for 9 months a year or for an average of 3 hours per week for less than 9 months per year.

**Sedentary person:** someone who has participated in a sports or fitness activity for less than 3 hours a week for less than 9 months a year.

In contrast, the 1988 Canada Health Promotion Survey defined frequency of physical activity as follows:

**Regularly:** participation in vigorous physical activities for at least 15 minutes, 3 times per week or more.

**Occasionally:** participation in vigorous physical activities for at least 15 minutes, 1 or 2 times per week.

**Sedentary:** participation in vigorous physical activities for at least 15 minutes less than once a week, or anything less.

In the present survey, frequency of physical activity is divided into 3 groups, as follows:

**Regularly:** participation in physical activities 3 times per week or more.

**Occasionally:** participation in physical activities 1 to 2 times per week.

**Sedentary:** participation in physical activities less than once per week, or never.

It will be noted that the definitions differ from one survey to another, a fact which may produce discrepancies in the results obtained. Nonetheless, it is observed that the proportion of "active" disabled persons, or those who regularly participate in physical activities, is much lower in HALS (30%) than the proportion of "active" individuals in the other two surveys (54% - Canada Fitness Survey, 56% - Canada Health Promotion Survey). However, in all three surveys, it has been noted that the proportion of people exercising regularly decreases with age, increases with educational level and is slightly higher among men than among women. It is also apparent that the regional differences are similar in the various surveys.

## 4. Smoking

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### Introduction

The questionnaire used for adults in the Health and Activity Limitation Survey contains one question on smoking frequency (question H9, section H). This question is similar to those used in the General Social Survey (1985) and the Canada Health Promotion Survey (1985); some comparisons are, therefore, possible between the Canadian population in general and the disabled population.

For purposes of analysis, the following categories have been defined:

- (a) **regular smokers** are those who reported that they smoke cigarettes every day;
- (b) **occasional smokers** are those who reported that they smoke cigarettes occasionally, but not every day; and
- (c) **non-smokers** are those who did not smoke at the time of the survey.

### Highlights

- Almost 30% of adults with disabilities are regular smokers. This percentage is virtually identical to that obtained for the Canadian adult population in recent surveys by Statistics Canada.
- The proportion of smokers among the disabled population varies considerably between males and females. For instance, 39% of men smoke, compared to only 28% of women. The difference is very small at age 15 to 24 but it increases with age.
- The proportion of smokers varies widely in relation to the age of the disabled individuals, with younger people more likely to be smokers than their elders. Young adults with disabilities are more likely to be smokers than young Canadian adults in general, while there is no significant difference among seniors.
- In general, the proportion of smokers declines as the severity of disability increases. However, this tendency varies with the age of the disabled individuals.
- Similar to surveys of the general population, HALS indicated that the proportion of smokers among those with disabilities decreases as the educational level increases. The one exception is the group with less than secondary graduation, which has a low proportion of smokers.



## Results

Table 13 presents the distribution of the types of smokers within the disabled population by age group and sex. A total of 33% of disabled persons are smokers, including 30% who regularly smoke. The proportion of smokers varies considerably by sex (39% for men and 28% for women), primarily among regular smokers.

This difference between males and females who smoke becomes more significant with age, dropping from 44% for men and 41% for women in the 15 to 24 age group to 25% for men and 14% for women among the senior population.

Even the data for both sexes indicate that the proportion of smokers varies widely in relation to age group, reaching its peak among young adults (25 to 44) at 48% and dropping to a low of 19% among the elderly.

**Table 13. Persons with Disabilities Aged 15 and Over by Type of Smoker by Age Groups by Sex, Canada**

Age Group/ Sex	Total Disabled Adults	Type of Smoker			
		Regular Smoker	Occasional Smoker	Non- Smoker %	Not Stated
<b>All ages</b>					
Both sexes	2,794,550	29.6	3.7	66.2	0.4
Males	1,326,305	34.9	4.0	60.4	0.6
Females	1,468,245	24.8	3.5	71.4	0.3
<b>15 to 24 years</b>					
Both sexes	181,325	36.3	6.3	57.1	--
Males	93,685	38.1	5.5	56.1	--
Females	87,640	34.4	7.0	58.3	--
<b>25 to 44 years</b>					
Both sexes	623,790	43.1	5.0	51.6	0.3
Males	314,495	45.1	5.2	49.3	0.4*
Females	309,295	41.0	4.8	54.0	--
<b>45 to 64 years</b>					
Both sexes	962,525	34.1	3.7	61.4	0.7
Males	480,510	39.7	3.9	55.2	1.2
Females	482,015	28.6	3.5	67.7	0.2*
<b>65 years and over</b>					
Both sexes	1,026,915	16.1	2.6	81.1	0.3
Males	437,615	21.8	3.0	75.1	0.2*
Females	589,295	11.9	2.3	85.5	0.3

**Table 14. Persons with Disabilities Aged 15 and Over by Type of Smoker by Age Groups by Severity of Disability, Canada**

Age Group / Severity Level	Total Disabled Adults	Type of Smoker			
		Regular Smoker	Occasional Smoker	Non Smoker %	Not Stated
<b>All ages</b>					
Total, all levels	2,794,550	29.6	3.7	66.2	0.4
Mild	1,286,160	31.9	3.7	63.9	0.4
Moderate	964,880	28.8	4.0	66.9	0.3
Severe	543,510	25.8	3.4	70.2	0.7
<b>15 to 24 years</b>					
Total, all levels	181,325	36.3	6.3	57.1	--
Mild	120,635	38.5	6.8	54.4	--
Moderate	46,730	37.1	5.2	57.5	--
Severe	13,960	15.5	--	79.4	--
<b>25 to 44 years</b>					
Total, all levels	623,790	43.1	5.0	51.6	0.3
Mild	371,640	43.7	4.5	51.4	0.3*
Moderate	185,730	43.3	5.9	50.4	0.4*
Severe	66,420	38.9	4.9	56.0	--
<b>45 to 64 years</b>					
Total, all levels	962,525	34.1	3.7	61.4	0.7
Mild	420,240	33.2	3.2	62.9	0.7
Moderate	351,920	33.5	4.4	61.7	0.4*
Severe	190,365	37.1	3.7	57.7	1.5
<b>65 years and over</b>					
Total, all levels	1,026,915	16.1	2.6	81.1	0.3
Mild	373,645	16.6	2.6	80.5	0.3*
Moderate	380,500	16.3	2.5	81.0	0.2*
Severe	272,765	15.2	2.7	81.9	--

Table 14 shows the distribution of the types of smokers among the disabled population by age group and severity of the disability. Generally speaking, the percentage of smokers declines as severity increases, dropping from 36% among individuals with mild disabilities to 33% among those with moderate disabilities and 29% among those with severe disabilities. However, this tendency is actually reversed for those between 45 and 64 years of age. The percentage of smokers rises from 36% among those with mild disabilities to 38% among those with moderate disabilities to 41% among those with severe disabilities.

**Table 15. Persons with Disabilities Aged 15 and Over by Type of Smoker by Education Level, Canada**

Education Level	Total Disabled Adults	Type of Smoker			
		Regular Smoker	Occasional Smoker	Non-Smoker %	Not Stated
<b>Total, all levels</b>	<b>2,794,550</b>	<b>29.6</b>	<b>3.7</b>	<b>66.2</b>	<b>0.4</b>
0 - 8 years	1,045,295	26.0	3.5	70.1	0.4
Secondary	1,018,635	33.9	4.2	61.4	0.6
Some post-secondary	379,070	32.0	3.7	63.9	0.4*
Certificate/diploma	232,375	30.1	2.9	66.8	--
University degree	119,165	17.0	4.1	78.8	--

Smoking tends to decline with increased schooling, from 38% of those who attended high school to 21% of those with university degrees (Table 15). The single exception to this trend occurs among those with the lowest level of schooling, where smokers constitute just under 30% of the population. Once again, the variations are most significant among regular smokers.

#### Education Categories

- 0-8 years, which includes no schooling, as well as kindergarten up to completion of grade 8.
- Secondary, which includes people who have completed at least some secondary schooling (grades 9-12), including those who have not received diplomas or certificates as well as those whose highest level of schooling is a secondary school graduation certificate or a trades certificate/diploma.
- Some post-secondary, which includes people who have attended university or college but who have not received a degree or diploma.
- Post-secondary certificate/diploma, which includes people who have received a post-secondary non-university certificate/diploma.
- University degree, which includes those who have received at least one university degree.

Finally, Table 16 shows the distribution of the types of smokers by total income. Despite slight variations, the distributions appear to remain constant regardless of income level.

**Table 16. Persons with Disabilities Aged 15 and Over by Type of Smoker by Total Income Groups, Canada**

Income	Total Disabled Adults	Type of Smoker			
		Regular Smoker	Occasional Smoker	Non-Smoker	Not Stated
Total, all incomes	2,794,550	29.6	3.7	66.2	0.4
Less than \$10,000	1,601,330	29.3	3.9	66.5	0.3
\$10,000 - \$19,999	633,245	29.2	3.4	66.8	0.5
\$20,000 - \$29,999	287,970	31.4	4.2	63.2	1.1
\$30,000 - \$39,999	164,610	32.6	3.5	63.8	--
\$40,000 and over	107,395	27.8	2.5	69.5	--

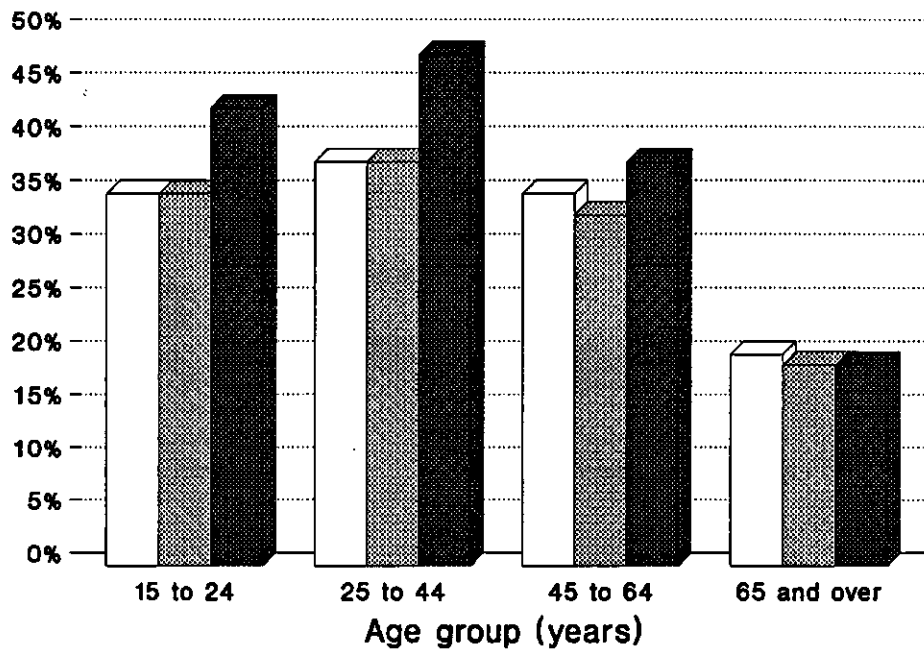
### Comparison and Discussion of Results

Smoking and its impact on health are assuming increasing importance in the public health policies of the industrialized nations, particularly Canada. For this reason, a question on smoking was included in the Health and Activity Limitation Survey questionnaire, in order to permit comparisons between the Canadian population in general and those with disabilities.

On the whole, the distribution of smokers in both populations shows a great deal of similarity. The HALS, the General Social Survey (GSS) and the Canada Health Promotion Survey (CHPS) all indicate a percentage of 33%-35% current smokers among adults 15 and over and very similar percentages by sex.

However, major differences are noted among the various age groups (Figure 3). It appears, in fact, that young adults (15 to 44) with disabilities include a much higher percentage of smokers than do young adults in general (43% compared to 35% for the 15 to 24 age group, and 48% compared to 38% for the 25 to 44 age group).

**Figure 3. Proportion of Current Smokers (Regular and Occasional) within Age Groups as reported in the GSS, CHPS and HALS, Canada**



GSS - General Social Survey, 1985 (general population)  
 CHPS - Canada Health Promotion Survey, 1985 (general population)  
 HALS - Health and Activity Limitation Survey, 1986 (disabled population)

Another interesting aspect of this analysis is the relationship between smoking and disability. It is not possible, of course, to establish a cause and effect relationship between the two within the context of a survey like the HALS; only a controlled study could accomplish that. However, one could consider the association between smoking and severity of disability. On first inspection, Table 16 does not appear to suggest any sign of a causal relationship between the variables, since the percentage of smokers decreases with the degree of disability. However, it appears that, for the older age groups, the percentage of smokers increases with the severity of disability. In order to adequately analyse these differences, it would be necessary to consider many other variables, including the nature of the disability and the percentage of former smokers among the non-smokers.

## 5. Alcohol Consumption

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### Introduction

The relationship between drinking and health is a controversial question and, for this reason, most recent health-related surveys include one or more questions regarding alcohol consumption. The HALS is no exception, and question H10 in section H of the adult questionnaire measures the degree of alcohol consumption over the past year. This question is identical to that used in the General Social Survey (1985) and the Canada Health Promotion Survey (1985); this permits some comparisons of the disabled population with the general population.

For purposes of analysis, the following categories have been defined:

- (a) those who **rarely or never drink** include those who have not taken a drink at all in the past twelve months, as well as those who state that they have taken a drink in the past twelve months, but less than once a month;
- (b) **current drinkers** include occasional and regular drinkers;
- (c) **occasional drinkers** are those who drink once a month or more, but less frequently than every day; and
- (d) **regular drinkers** report that they take a drink of alcohol every day.

### Highlights

- An estimated 43% of adults with disabilities consume alcohol at least once a month compared to the national average of 63%.
- The frequency of current drinkers among the disabled is much higher for men than for women and tends to diminish with age. However, the percentage of regular drinkers tends to increase with age but the patterns differ for men and women.
- Alcohol consumption tends to decline with the severity of disability.
- Alcohol consumption increases with income and education, in contrast to the pattern for smoking. This is similar to trends observed in the general population.

## Results

The HALS data indicate that 43% of the disabled population in Canada are current drinkers, consisting of regular drinkers and occasional drinkers (Table 17). The proportion of current drinkers differs widely in relation to sex (55% for men compared to 33% for women). The distribution by age also presents a number of interesting characteristics. For example, the proportion of current drinkers declines with age group, particularly among women. The proportion of men who are regular drinkers increases with age until age 65, when there is a slight decrease among seniors. The proportion of regular drinkers among women follows an irregular pattern but the heaviest concentration is among seniors. Finally, the relative difference between the percentage of males and females who are current drinkers tends to increase with age, ranging from 7.2% at age 15 to 24 to 24.4% at age 45 to 64 years.

**Table 17. Persons with Disabilities Aged 15 and Over by Type of Drinker by Age Groups by Sex, Canada**

Age Group/Sex	Total Disabled Adults	Type of Drinker				
		Rarely or Never Drink	Current Drinkers			
			Total Current Drinkers	Drink Occasionally %	Drink Regularly (Daily)	Not Stated
<b>All ages</b>						
Both sexes	2,794,550	56.2	43.2	38.1	5.1	0.6
Males	1,326,305	44.4	54.7	46.8	7.8	0.9
Females	1,468,245	66.9	32.8	30.2	2.6	0.3
<b>15 to 24 years</b>						
Both sexes	181,325	46.0	52.5	51.6	0.9	1.6
Males	93,685	41.5	56.0	54.5	1.4*	2.5
Females	87,640	50.7	48.8	48.4	--	--
<b>25 to 44 years</b>						
Both sexes	623,790	44.0	55.5	52.2	3.4	0.4
Males	314,495	35.2	64.2	59.9	4.3	0.7
Females	309,295	53.0	46.8	44.4	2.4	--
<b>45 to 64 years</b>						
Both sexes	962,525	54.3	45.0	38.8	6.2	0.7
Males	480,510	41.7	57.2	46.9	10.3	1.1
Females	482,015	66.9	32.8	30.8	2.0	0.3*
<b>65 years and over</b>						
Both sexes	1,026,915	67.2	32.3	26.4	5.9	0.5
Males	437,615	54.7	44.7	35.8	9.0	0.5
Females	589,295	76.5	23.1	19.5	3.6	0.4

Like smoking, drinking tends to decrease as the severity of disability increases (Table 18). The proportion of current drinkers drops from 51% among individuals with slight disabilities to 41% among those with moderate disabilities and 29% among those with severe disabilities. (Unlike smoking, this pattern remains constant with age; it is noted, however, that the gap between the percentages of current drinkers among those with slight disabilities and severe disabilities reduces as age increases.)

**Table 18. Persons with Disabilities Aged 15 and Over by Type of Drinker by Severity of Disability, Canada**

Severity Level	Total Disabled Adults	Type of Drinker				
		Rarely or Never Drink	Current Drinkers			
			Total Current Drinker	Drink Occasionally %	Drink Regularly (Daily)	Not Stated
<b>Total, all levels</b>	<b>2,794,550</b>	<b>56.2</b>	<b>43.2</b>	<b>38.1</b>	<b>5.1</b>	<b>0.6</b>
Mild	1,286,160	47.9	51.3	46.6	4.7	0.7
Moderate	964,880	59.2	40.5	35.1	5.4	0.4
Severe	543,510	70.5	28.7	23.2	5.5	0.8



Table 19 indicates that, within the disabled population, the percentage of current drinkers tends to increase with income. In fact, the proportion of current drinkers nearly doubles between the lowest and the highest income groups. This pattern contrasts with that observed in the case of smoking, where consumption appears to be independent of income.

**Table 19. Persons with Disabilities Aged 15 and Over by Type of Drinker by Total Income Groups, Canada**

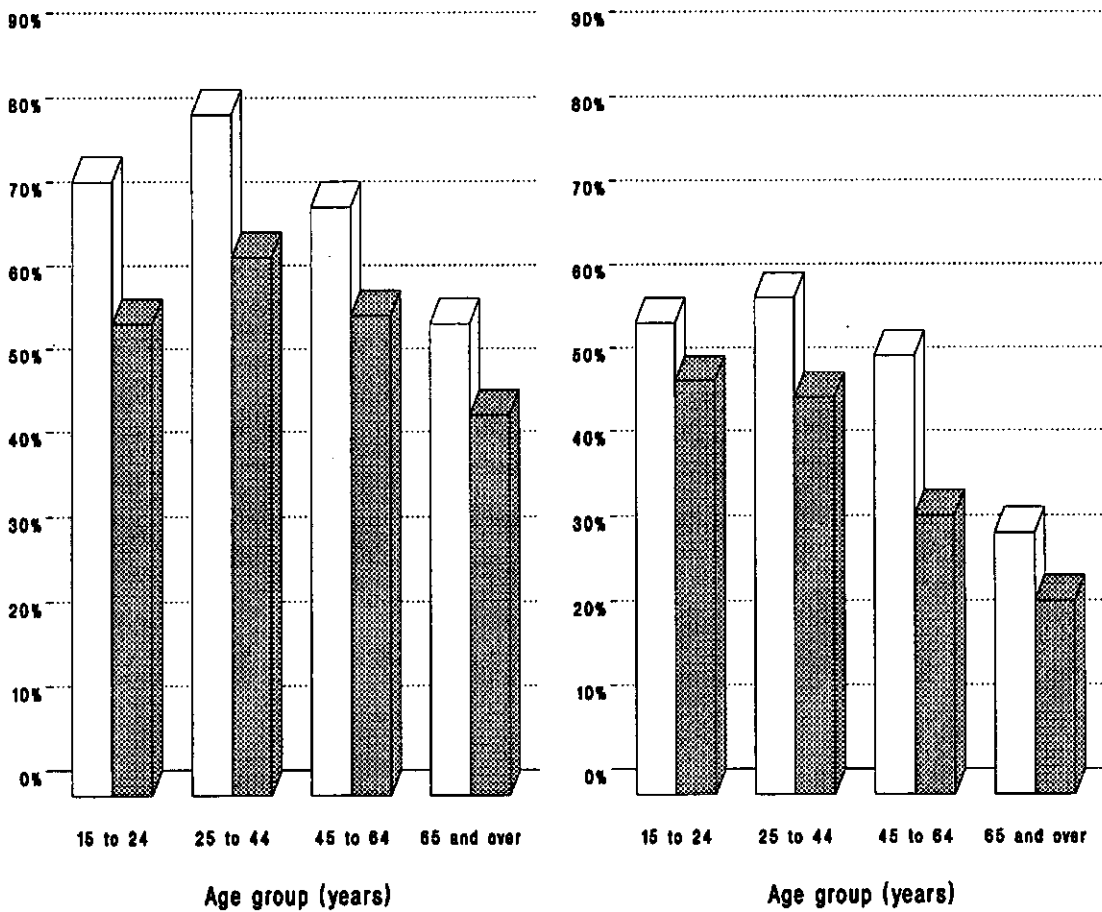
Age Group/ Sex	Type of Drinker					
	Total Disabled Adults	Rarely or Never Drink	Current Drinkers			
			Total Current Drinkers	Drink Occasionally %	Drink Regularly (Daily)	Not Stated
Total income	2,794,550	56.2	43.2	38.1	5.1	0.6
Less than \$10,000	1,601,330	64.8	34.7	31.3	3.4	0.5
\$10,000 to \$19,999	633,245	53.8	45.7	38.7	7.0	0.5
\$20,000 to \$29,999	287,970	38.1	60.7	54.7	6.0	1.2
\$30,000 to \$39,999	164,610	30.3	69.5	60.9	8.6	--
\$40,000 to \$49,999	59,960	31.5	68.3	56.6	11.7	--
\$50,000 and more	47,440	30.4	66.8	55.7	11.1	2.8*

### Comparison and discussion of results

Like smoking, drinking has for some time been recognized as having a significant relationship with health. It was, therefore, appropriate to include a question on alcohol consumption on the HALS questionnaire in order to relate this characteristic to the various aspects of disability and to permit comparison with the general population.

The percentage of drinkers among individuals with disabilities is clearly lower than in the general population. The percentage of current drinkers within the Canadian adult population is estimated by the General Social Survey to be 63% (the Canada Health Promotion Survey estimated this percentage at 61%), while the HALS estimates current drinkers to be 43% of the disabled population. Figure 4 shows that this gap is relatively constant in relation to sex and age, except possibly in the case of young adults (15 to 24, particularly women), and for seniors.

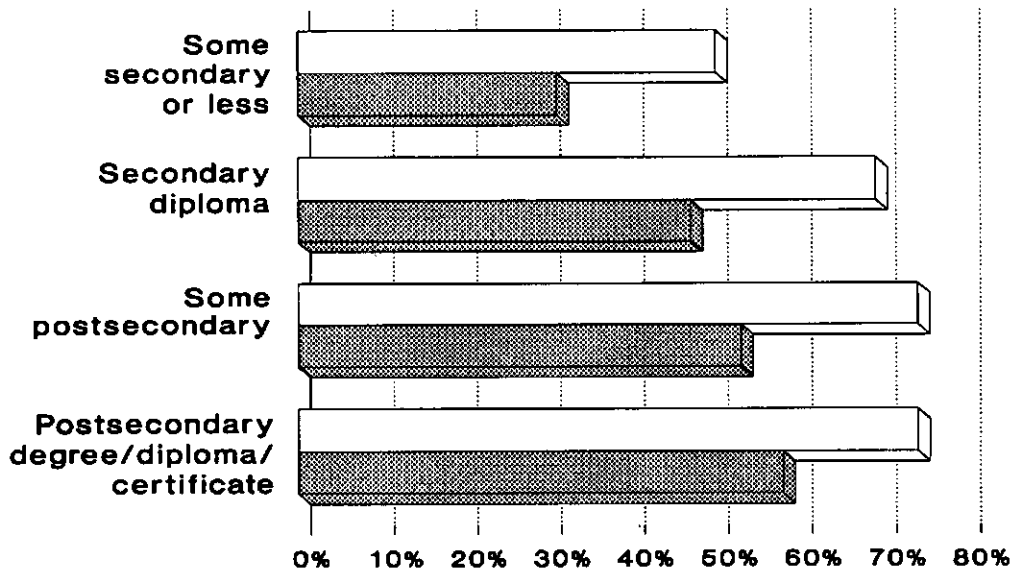
**Figure 4. Comparison of the GSS and HALS by Percentage of Current Drinkers by Age Groups by Sex, Canada**



GSS - General Social Survey, 1985 (general population)  
 HALS - Health and Activity Limitation Survey (disabled population)

Figure 5 shows that the percentage of current drinkers steadily increases as the educational level increases within both the general and the disabled populations. In each education category, the proportion of current drinkers among the general population is significantly higher than the corresponding figure for the disabled population.

**Figure 5. Proportion of Current Drinkers within Education Levels as reported in the GSS and HALS, Canada**



GSS - General Social Survey, 1985 (general population)  
 HALS - Health and Activity Limitation Survey (disabled population)

*Education categories are defined on page 25; some have been combined in order to match the GSS categories.*

Although the percentage of current drinkers is considerably higher for the general population compared to the disabled population, this difference is even greater when considering only the regular drinkers (those who drink everyday) (Table 20). Overall, the proportion of regular drinkers is four times greater among the general population but it differs dramatically by sex and age groups.

**Table 20. Proportion of Regular Drinkers<sup>1</sup> Reported in the GSS and HALS by Sex and Age Groups, Canada**

Sex/ Age Group	GSS		HALS	
	Total Adults '000	Regular Drinkers %	Total Disabled Adults '000	Regular Drinkers %
<b>Both sexes</b>				
All ages	19,668	19	2,795	5
15 to 24 years	4,297	17	181	1
25 to 44 years	8,061	21	624	3
45 to 64 years	4,838	18	963	6
65 years and over	2,472	14	1,027	6
<b>Male</b>				
All ages	9,648	28	1,326	8
15 to 24 years	2,186	26	94	1*
25 to 44 years	4,021	32	314	4
45 to 64 years	2,376	25	481	10
65 years and over	1,065	22	438	9
<b>Female</b>				
All ages	10,019	9	1,468	3
15 to 24 years	2,111	8	88	--
25 to 44 years	4,039	9	309	2
45 to 64 years	2,461	11	482	2
65 years and over	1,407	8	589	4

<sup>1</sup> Regular drinkers are those who reported that they take a drink of alcohol every day.

**GSS - General Social Survey, 1985 (general population)**  
**HALS - Health and Activity Limitation Survey, 1986 (disabled population)**

In the report **Health and Social Support 1985**, based on data from the General Social Survey, analyses revealed that current drinkers tended to describe themselves as being in better health than non-drinkers and former drinkers. The results from the HALS confirm this tendency, since the percentage of current drinkers decreases among those with more serious health conditions. For instance, there are more current drinkers among the general population than among those with a mild disability; the percentage drops further for those with moderate disabilities and even further for the severely disabled. Given this relationship, it seems probable that the health condition of those with disabilities acts as a cause rather than as an effect. In fact, while the beneficial effect of moderate drinking on general health cannot be completely dismissed, it is likely that the health and lifestyles of those with disabilities are the direct cause of their lower consumption of alcohol (compared to the general population).

## 6. Eating Habits

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### Introduction

It has long been recognized that diet and health are closely related in terms of both quality and quantity. Two questions on eating habits were included in the HALS questionnaire, one on the quality of eating habits (question H11, section H) and one on ways to improve these habits (question H12, section H). It is important to note that the responses represent subjective judgments on the part of the respondent with respect to his/her own situation. An objective measurement based on the actual diet of the respondent would have required the inclusion of a large number of questions on the topic or the use of dieticians for data collection, methods too complex for the objectives of the HALS.

Eating habits were classified as "excellent or very good", "good or fair" and "poor". Ways of improving eating habits included "eat more food", "eat less food", "eat a greater variety of foods", "eat at more regular intervals" and "nothing".

### Highlights

- Nearly 44% of those with disabilities consider their eating habits "excellent or very good", while approximately 51% consider them "good or fair" and 5% "poor".
- In general, men tend to judge their eating habits more favourably than women. Assessments vary only slightly in relation to age.
- Eating less food and eating a greater variety of foods are the measures most frequently selected for improving eating habits. The measures selected differ considerably with age and severity of disability and with respondents' assessments of the quality of their own eating habits.

**Table 21. Persons with Disabilities Aged 15 and Over by Quality of Eating Habits by Age Groups by Sex, Canada**

Age Group/ Sex	Total Disabled Adults	Quality of Eating Habits			
		Excellent or Very Good	Good or Fair	Poor	Don't Know/ Not Stated
		%			
<b>Total, All ages</b>					
Both sexes	2,794,550	43.6	50.5	5.3	0.7
Males	1,326,305	45.6	48.9	5.0	0.5
Females	1,468,245	41.7	51.9	5.5	0.9
<b>15 to 24 years</b>					
Both sexes	181,325	42.6	48.3	7.8	1.3
Males	93,685	53.1	37.7	8.7	--
Females	87,640	31.2	59.8	6.9	2.1
<b>25 to 44 years</b>					
Both sexes	623,790	42.5	50.8	6.3	0.5
Males	314,495	43.7	49.8	6.1	0.4*
Females	309,295	41.2	51.8	6.5	0.5*
<b>45 to 64 years</b>					
Both sexes	962,525	41.9	52.4	5.0	0.6
Males	480,510	43.9	51.1	4.6	0.4
Females	482,015	40.0	53.8	5.5	0.8
<b>65 years and over</b>					
Both sexes	1,026,915	46.0	48.8	4.4	0.8
Males	437,615	47.3	48.2	3.9	0.6
Females	589,295	45.0	49.3	4.7	1.0

## Results

In assessing their own eating habits (Table 21), 44% of those with disabilities consider their habits to be "excellent or very good", 51% consider them "good or fair", while five percent consider them "poor". In general, men tend to judge their eating habits more favourably than women, particularly younger men. For example, 53% of men aged 15 to 24 report that their habits are "excellent or very good", compared to only 31% of women of that age. Moreover, the pattern of the assessments remains virtually constant with age, except for the age group 15 to 24. Young men are much more likely than older men to report "excellent or very good" eating habits, while the opposite is true of women.

Table 22 shows clearly that satisfaction with eating habits increases with income, with the percentage of "excellent or very good" habits rising from 41% for the lowest income group to 52% for the highest.

**Table 22. Persons with Disabilities Aged 15 and Over by Quality of Eating Habits by Total Income, Canada**

Income Group	Total Disabled Adults	Quality of Eating Habits			
		Excellent or Very Good	Good or Fair	Poor	Don't Know/ Not Stated
Total income	2,794,550	43.6	50.5	5.3	0.7
Less than \$10,000	1,601,330	41.2	51.7	6.3	0.9
\$10,000 to \$19,999	633,245	44.4	50.8	4.2	0.6
\$20,000 to \$29,999	287,970	47.3	49.2	3.3	--
\$30,000 and more	272,005	51.5	44.2	3.9	0.4*



The most frequently mentioned measures which could be taken to improve eating habits (Table 23), are eating less food and eating a greater variety of foods (16% and 15% of the responses respectively). Eating more food is selected less frequently (5%) than the other categories. The distribution of these measures varies considerably with age. Eating more food is selected more frequently by the youngest group, while eating less food is a more frequent response with age, with the exception of the eldest group. A more varied diet and more regular spacing of meals are mentioned more frequently by young adults. It is noted, however, that more than half of the respondents reported no particular measures and that this situation becomes more pronounced with age.

**Table 23. Persons with Disabilities Aged 15 and Over by Possible Measures to Improve Eating Habits by Age Groups, Canada**

Age group	Total Disabled Adults	Improvements to Eating Habits				
		Eat More Food	Eat Less Food	Eat a Greater Variety %	Eat at More Regular Intervals	Nothing/ Don't Know/ Not Stated
All ages	2,794,550	4.6	16.4	15.3	8.2	55.4
15 to 24 years	181,325	7.0	10.1	26.2	12.3	44.4
25 to 44 years	623,790	4.9	19.0	20.4	15.5	40.3
45 to 64 years	962,525	3.9	20.4	14.8	7.5	53.4
65 years and over	1,026,915	4.6	12.3	10.7	3.8	68.6

Table 24 presents the distribution of the suggested measures for improvement in relation to the assessments of eating habits. As might be expected, the suggestion of measures for improvement is closely related to the assessment of these habits. Looking at the distribution of the measures suggested reveals a number of interesting tendencies. For example, there is a clear tendency to suggest eating more food as the assessment of eating habits becomes more negative. The trend is the same, although not as strong, towards selecting eating at more regular intervals. There is an inverse tendency to select a diet consisting of less food, with this selection by far the most popular among those respondents who consider their eating habits excellent or very good.

**Table 24. Persons with Disabilities Aged 15 and Over by Possible Measures to Improve Eating Habits by Quality of Eating Habits, Canada**

Quality of Eating Habits	Total Disabled Adults	Improvements to Eating Habits				
		Eat More Food	Eat Less Food	Eat a Greater Variety %	Eat at More Regular Intervals	Nothing Don't Know/ Not Stated
<b>Total</b>	<b>2,794,550</b>	<b>4.6</b>	<b>16.4</b>	<b>15.3</b>	<b>8.2</b>	<b>55.4</b>
Excellent or very good	1,217,655	1.5	17.4	9.0	3.6	68.6
Good or fair	1,410,665	5.6	16.1	20.1	11.2	47.0
Poor	146,875	21.4	10.9	22.4	18.8	26.5
Don't know/ Not stated	19,355	--	19.6	10.4	5.0*	64.3

Table 25 shows that there are no dramatic variations in the distribution of these measures in relation to respondents' incomes. However, it may be noted that eating more food is mentioned more frequently by those with low incomes than by those in the higher income groups.

**Table 25. Persons with Disabilities Aged 15 and Over by Possible Measures to Improve Eating Habits by Total Income Groups, Canada**

Income Group	Improvements to Eating Habits					
	Total Disabled Adults	Eat More Food	Eat Less Food	Eat a Greater Variety %	Eat at More Regular Intervals	Nothing/Don't Know/Not Stated
Total income	2,794,550	4.6	16.4	15.3	8.2	55.4
Less than \$10,000	1,601,330	5.4	15.6	15.1	7.3	56.6
\$10,000 to \$19,999	633,245	3.8	16.0	14.3	8.2	57.7
\$20,000 to \$29,999	287,970	2.9	20.3	15.4	10.6	50.9
\$30,000 and more	272,005	3.3	18.2	18.8	11.2	48.5

Finally, Table 26 presents the distribution of the measures for improving eating habits in relation to the severity of disability. There is little difference between the measures selected by persons who are mildly disabled and those who are moderately disabled.

The responses from the severely disabled population, however, differ for the measures concerning a change in the quantity of food. In fact, the proportion of severely disabled persons who suggested eating more food (7.7%) is considerably higher than the proportion of the total disabled population who suggested this (4.6%). Also, fewer severely disabled persons suggested eating less (12.2%) as compared to the total disabled population (16.4).

**Table 26. Persons with Disabilities Aged 15 and Over by Possible Measures to Improve Eating Habits by Severity of Disability, Canada**

Severity Level	Improvements to Eating Habits					
	Total Disabled Adults	Eat More Food	Eat Less Food	Eat a Greater Variety %	Eat at More Regular Intervals	Nothing/Don't Know/Not Stated
Total	2,794,550	4.6	16.4	15.3	8.2	55.4
Mild	1,286,160	4.0	18.0	16.2	8.5	53.3
Moderate	964,880	3.7	16.8	15.0	8.1	56.5
Severe	543,510	7.7	12.2	13.6	7.8	58.7

## 7. Support Network

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### Introduction

The social environment and the support network represent one of the most important aspects of the condition of those with disabilities.

Section C of the HALS adult questionnaire was devoted to the support network available to provide assistance with carrying out everyday activities. These activities included meal preparation, regular shopping, housework, money management and personal care. For each type of activity, the respondent's dependency was classified in one of the following categories:

- (a) the respondent performed the activity without assistance;
- (b) the respondent performed the activity with assistance from someone else (due to health problems);
- (c) someone else performed the activity for the respondent (due to health problems); and
- (d) someone else performed the activity for the respondent (for reasons other than health problems).

For the purposes of this survey, categories (b) and (c) are considered situations in which the respondent receives relevant help, and all reference to help received in the subsequent analyses will refer to these two categories.

If the respondent received relevant help in one of the activities, he/she was then asked who provided the help (relative, friend, or specialist) and how often it was provided.

The census database provides information on the size and structure of the households in which persons with disabilities live, which is an important factor in the analysis of the help people need and receive. These data on living arrangements have been classified into the following categories:

- living alone;
- living with spouse (persons living only with their spouse or with their spouse and others); and
- living with others (persons living with others, none of whom is their spouse).

## **Highlights**

- The need for help as a result of disability increases with age and varies considerably between the sexes, depending on the type of activity.
- Help received because of a disabling condition is primarily provided by a spouse or relative.
- Canadians with disabilities tend to live in smaller households than do Canadians in general. In both the disabled population and the total Canadian population, household size diminishes with age and differs significantly between the sexes, particularly among seniors.

## Results

Table 27 shows how persons with disabilities accomplish various everyday activities. It appears that heavy household chores are the activities which require the most help because of a disabling condition (46%), followed by shopping (23%), housework (22%), management of personal finances (14%) and, finally, meal preparation (12%). Management of personal finances is the activity most commonly performed **without** help (57%).

In general, the need for help increases with age, particularly total help, that is, someone else performs the activity because of the disability. The youngest respondents are by far the most likely to receive help for reasons other than their condition, except in the case of management of their personal finances.

The differences between the sexes are very marked. Three groupings of activities can be identified on the basis of the distributions observed.

First, shopping, meal preparation and housework are the activities which most men do not do themselves for reasons other than their condition, whereas the majority of the women perform these activities themselves. These tasks have traditionally been performed by females in the general population and this appears to be true of the disabled population as well.

These observations are valid for all age groups, although within the youngest age group, a larger proportion of men do not perform these activities themselves for reasons other than their condition.

Next are heavy household chores, in which the percentage of persons receiving help for reasons other than disability is similar in both sexes. However, there are many more women than men who do not do heavy household chores at all because of their condition (45% compared to 28%). The percentage increases with age, particularly among women.

Finally, the distribution of respondents who receive help with management of personal finances varies only slightly on the basis of sex. However, comparing the sexes on the basis of age, several differences are noted. For example, women aged 65 and over abstain from money management for reasons other than disability less frequently than men (17% compared to 28%), but they require more help (24% compared to 16%).

**Table 27. Persons with Disabilities Aged 15 and Over by Level of Dependence by Sex by Age Groups by Type of Activity, Canada**

Sex/Age Group/ Activity	Total	Level of Dependence				Not Stated
		Self Without Assistance	Self With Assistance (Health Reasons)	Entirely by Someone Else (Health Reasons)	Receives Help (Other Reasons)	
%						
<b>BOTH SEXES</b>						
<b>All ages</b>						
Meal preparation	100.0	47.4	4.7	7.2	37.7	2.9
Shopping	100.0	34.5	10.1	13.1	39.1	3.2
Housework	100.0	37.4	10.6	11.8	37.1	3.1
Heavy Chores <sup>1</sup>	100.0	17.2	8.7	36.9	23.8	13.6
Finances	100.0	57.0	4.1	9.6	25.6	4.2
<b>15 to 24</b>						
Meal preparation	100.0	32.0	2.2	7.2	55.3	3.3
Shopping	100.0	25.4	4.4	7.2	59.7	3.3
Housework	100.0	29.8	3.9	6.1	56.9	3.3
Heavy Chores <sup>1</sup>	100.0	18.2	3.9	13.3	42.5	22.1
Finances	100.0	61.3	3.3	10.0	21.5	3.9
<b>25 to 44</b>						
Meal preparation	100.0	48.5	5.0	4.5	39.1	2.9
Shopping	100.0	40.4	7.7	7.7	41.0	3.2
Housework	100.0	42.3	10.1	6.1	38.1	3.2
Heavy Chores <sup>1</sup>	100.0	25.2	9.8	23.9	29.3	11.9
Finances	100.0	59.0	2.7	6.1	28.5	3.7
<b>45 to 64</b>						
Meal preparation	100.0	49.7	4.8	4.8	37.9	2.8
Shopping	100.0	35.6	11.2	9.9	40.2	3.1
Housework	100.0	38.8	11.4	9.6	37.3	2.9
Heavy Chores <sup>1</sup>	100.0	17.7	10.4	40.0	21.5	10.4
Finances	100.0	58.1	3.1	6.6	28.7	3.5
<b>65 and over</b>						
Meal preparation	100.0	47.2	5.0	11.2	33.6	3.0
Shopping	100.0	31.5	11.5	20.5	33.2	3.3
Housework	100.0	34.6	11.2	18.4	32.7	3.1
Heavy Chores <sup>1</sup>	100.0	11.6	7.3	46.1	19.2	15.8
Finances	100.0	54.0	5.9	14.7	21.5	3.9

<sup>1</sup> The "Not Stated" category for heavy chores includes those who reported that no one does these chores and those for whom the question was not applicable.

.../continued

**Table 27. Persons with Disabilities Aged 15 and Over by Level of Dependence by Sex by Age Groups by Type of Activity, Canada (continued)**

Sex/Age Group/Activity	Total	Level of Dependence				Not Stated
		Self Without Assistance	Self With Assistance (Health Reasons)	Entirely by Someone Else (Health Reasons)	Receives Help (Other Reasons)	
<b>MALES</b>						
<b>All ages</b>						
Meal preparation	100.0	21.9	2.3	7.4	65.4	3.0
Shopping	100.0	23.2	4.6	10.0	58.6	3.5
Housework	100.0	18.0	3.8	11.1	63.9	3.2
Heavy Chores <sup>1</sup>	100.0	21.9	8.9	28.3	27.6	13.3
Finances	100.0	54.5	3.1	8.4	29.9	4.1
<b>15 to 24</b>						
Meal preparation	100.0	18.3	1.1*	7.5	67.7	5.4
Shopping	100.0	14.0	2.1	7.5	71.0	5.4
Housework	100.0	16.1	2.1	5.4	71.0	5.4
Heavy Chores <sup>1</sup>	100.0	16.1	3.2	8.6	46.3	25.8
Finances	100.0	58.1	3.2	10.8	21.5	6.5
<b>25 to 44</b>						
Meal preparation	100.0	24.4	2.6	5.4	63.8	3.8
Shopping	100.0	24.8	3.5	7.6	60.0	4.1
Housework	100.0	22.8	3.2	6.7	63.2	4.1
Heavy Chores <sup>1</sup>	100.0	28.9	10.5	16.8	30.5	13.3
Finances	100.0	54.9	2.6	6.3	31.4	4.8
<b>45 to 64</b>						
Meal preparation	100.0	23.3	2.3	5.8	66.3	2.3
Shopping	100.0	24.0	5.2	8.1	59.8	2.9
Housework	100.0	18.6	4.0	10.4	64.3	2.7
Heavy Chores <sup>1</sup>	100.0	23.3	9.8	32.5	24.4	10.0
Finances	100.0	55.6	2.1	6.3	32.5	3.5
<b>65 and over</b>						
Meal preparation	100.0	19.2	2.5	10.5	65.1	2.7
Shopping	100.0	23.3	5.3	14.4	53.6	3.4
Housework	100.0	14.4	4.3	16.2	62.4	2.7
Heavy Chores <sup>1</sup>	100.0	16.4	8.0	36.3	25.1	14.1
Finances	100.0	52.3	4.6	11.6	27.8	3.7

*1 The "Not Stated" category for heavy chores includes those who reported that no one does these chores and those for whom the question was not applicable.*

.../continued



**Table 27. Persons with Disabilities Aged 15 and Over by Level of Dependence by Sex by Age Groups by Type of Activity, Canada (concluded)**

Sex/Age Group/ Activity	Total	Level of Dependence				Not Stated
		Self Without Assistance	Self With Assistance (Health Reasons)	Entirely by Someone Else (Health Reasons) %	Receives Help (Other Reasons)	
<b>FEMALES</b>						
<b>All ages</b>						
Meal preparation	100.0	70.4	6.9	7.1	12.7	2.8
Shopping	100.0	44.6	15.1	15.9	21.5	2.9
Housework	100.0	55.0	16.7	12.4	12.9	3.0
Heavy Chores <sup>1</sup>	100.0	12.9	8.5	44.7	20.3	13.6
Finances	100.0	59.2	5.0	10.8	21.6	3.4
<b>15 to 24</b>						
Meal preparation	100.0	46.6	3.4	6.8	42.1	1.1*
Shopping	100.0	37.5	6.8	6.8	47.8	1.1*
Housework	100.0	44.3	5.7	6.8	42.1	1.1*
Heavy Chores <sup>1</sup>	100.0	20.5	4.5	18.2	38.6	18.1
Finances	100.0	64.8	3.4	9.1	21.6	1.1*
<b>25 to 44</b>						
Meal preparation	100.0	73.1	7.5	3.6	13.9	1.9
Shopping	100.0	56.3	12.0	7.8	21.7	2.3
Housework	100.0	62.1	17.2	5.5	12.6	2.6
Heavy Chores <sup>1</sup>	100.0	21.4	9.1	31.1	28.1	10.4
Finances	100.0	63.1	2.9	5.8	25.6	2.6
<b>45 to 64</b>						
Meal preparation	100.0	75.9	7.3	3.7	9.8	3.3
Shopping	100.0	47.2	17.2	11.6	20.7	3.3
Housework	100.0	58.9	18.9	8.7	10.4	3.1
Heavy Chores <sup>1</sup>	100.0	12.0	11.0	47.5	18.7	10.8
Finances	100.0	60.6	4.2	6.8	24.9	3.5
<b>65 and over</b>						
Meal preparation	100.0	68.1	6.8	11.7	10.2	3.2
Shopping	100.0	37.6	16.1	25.1	18.0	3.2
Housework	100.0	49.6	16.3	20.0	10.7	3.4
Heavy Chores <sup>1</sup>	100.0	8.0	6.8	53.5	14.8	17.0
Finances	100.0	55.2	7.0	16.9	16.8	4.1

<sup>1</sup> The "Not Stated" category for heavy chores includes those who reported that no one does these chores and those for whom the question was not applicable.

Table 28 shows that personal care is the activity which requires the least help from others (7%). The need for help tends to be higher for those aged 65 and older (10%). There appear to be few variations between the sexes.

**Table 28. Persons with Disabilities Aged 15 and Over by Help Needed with Personal Care by Sex by Age Groups, Canada**

Sex/ Age Group	Total Disabled Adults	Help with Personal Care		
		Does Not Need Help	Needs Help %	Not Stated
<b>Both sexes</b>				
All ages	2,794,550	90.3	6.6	3.1
15 to 24 years	181,325	91.1	6.0	2.9
25 to 44 years	623,790	93.2	3.7	3.1
45 to 64 years	962,525	92.3	4.9	2.8
65 years and over	1,026,915	86.6	10.1	3.3
<b>Males</b>				
Total, all ages	1,326,305	90.4	6.3	3.3
15 to 24 years	93,685	88.9	6.1	5.0
25 to 44 years	314,495	92.2	3.7	4.2
45 to 64 years	480,510	92.1	5.1	2.8
65 years and over	437,615	87.6	9.4	2.9
<b>Females</b>				
Total, all ages	1,468,245	90.2	6.9	2.8
15 to 24 years	87,640	93.5	5.8	--
25 to 44 years	309,295	94.3	3.8	1.9
45 to 64 years	482,015	92.4	4.7	2.9
65 years and over	589,295	85.9	10.5	3.6

Although the data tables have not been included in this report, analysis of help received in relation to the severity of disability revealed that the proportion receiving partial help increases sharply with the severity of the disability, and, even more so, for total help. The proportion who do not perform the activities, for reasons other than the disability, decreases as severity increases. These patterns were true of all activities. Help from friends or relatives is more frequent in most activities for more severe disabilities, while help from others is relatively higher for those with mild disabilities, except in the case of heavy household chores and personal care.

The following series of tables relates to the type of persons who receive help with their activities because of their condition. Table 29 indicates, as might be expected, that for those who receive help, most of the help is provided by the spouse or relatives (nearly 80% of the cases, in all activities except heavy household chores). Help from persons other than friends or relatives, such as a member of a home care organization or attendant care service, is most common for heavy household chores, personal care and everyday housework (30%, 28% and 27% respectively). The variations in the distributions by age are negligible except in the case of seniors, where the category "other" is clearly higher in most activities.

**Table 29. Persons with Disabilities Aged 15 and Over Receiving Help with Everyday Activities due to Health Problems by Source of Help Received by Age Groups by Type of Activity, Canada**

Age Group/ Activity	Total Disabled Adults	Source of Help <sup>1</sup>		
		Spouse or Relative	Friend or Neighbour %	Other Help or Service
<b>All ages</b>				
Meals	333,520	79.3	9.9	24.3
Shopping	648,525	84.0	14.0	13.7
Housework	625,115	75.4	8.5	27.2
Heavy Chores	1,274,925	67.3	12.5	29.8
Finances	384,105	87.5	7.0	10.2
Personal Care	184,550	78.4	7.0	28.1
<b>15 to 24 years</b>				
Meals	17,700	88.2	11.8	17.6
Shopping	21,555	90.5	14.3	14.3
Housework	17,985	88.2	6.3*	17.6
Heavy Chores	30,975	83.9	9.7	12.9
Finances	24,130	80.0	--	12.0
Personal Care	10,840	81.8	--	18.2
<b>25 to 44 years</b>				
Meals	58,445	79.7	13.6	18.6
Shopping	95,855	82.3	17.7	10.4
Housework	101,315	82.4	11.8	18.6
Heavy Chores	209,580	78.0	14.8	17.7
Finances	55,290	83.6	9.1	12.7
Personal Care	23,210	75.0	12.5	16.7
<b>45 to 64 years</b>				
Meals	91,815	81.5	9.8	18.5
Shopping	202,985	86.7	12.3	9.8
Housework	202,845	81.3	10.3	17.7
Heavy Chores	485,875	72.6	11.7	25.1
Finances	93,380	87.1	6.4	11.8
Personal Care	47,095	89.4	4.2	21.3
<b>65 years and over</b>				
Meals	165,565	77.1	8.4	30.1
Shopping	328,135	82.3	14.0	17.1
Housework	302,965	68.3	6.3	37.0
Heavy Chores	548,495	57.5	12.4	39.6
Finances	211,305	89.6	7.1	8.5
Personal Care	103,410	73.8	7.8	35.0

*1 Percentages may not add to 100% for any activity because respondents may report more than one source of help.*

The final discussion concerns the size and structure of the households in which those with disabilities live. Table 30 shows that 19% of disabled persons live alone, while 44% live in households of three or more persons. It indicates that those with mild disabilities are more likely than others to live in larger households. (In further analysis, it was noted that there was a clear tendency to a reduction in household size as the age of the disabled individuals increases.)

**Table 30. Persons with Disabilities Aged 15 and Over by Number of Persons in the Household by Severity of Disability, Canada**

Severity Level	Total Disabled Adults	Number of Persons in the Household		
		One Person	Two Persons %	Three or More Persons
Total	2,794,550	18.7	37.7	43.6
Mild	1,286,160	16.9	35.1	48.0
Moderate	964,880	20.3	39.7	40.0
Severe	543,510	19.9	40.3	39.8

On the whole, the majority of those with disabilities (58%) live with a spouse and, possibly, other persons (Table 31). However, this structure varies considerably with age, especially among the youngest respondents. Men are more likely than women to live with a spouse, particularly among the elderly. Finally, there is a clear shift away from living with a spouse to other types of households as the severity of the disability increases.

**Table 31. Persons with Disabilities Aged 15 and Over by Household Structure by Severity of Disability, Canada**

Severity Level	Total Disabled Adults	Household Structure		
		Living Alone	Living With a Spouse %	Living With Others
Total	2,794,550	18.7	57.5	23.8
Mild	1,286,160	16.9	60.5	22.6
Moderate	964,880	20.3	56.3	23.4
Severe	543,510	19.9	52.8	27.3

### Comparison and Discussion

Table 32 presents a comparison of some of the preceding distributions with the corresponding distributions for the Canadian population. The comparison is based on the size of the households of disabled respondents and those of all HALS respondents i.e. the total population. It is immediately apparent that persons with disabilities tend to live in smaller households than do Canadians as a whole, particularly in the 45 to 64 age group. Moreover, the differences noted between the two populations are more marked among women than among men, except in the case of the elderly. This relative isolation of the disabled, particularly those with severe disabilities (for example, Table 30), is somewhat surprising, in view of the fact that their situation creates a need for support income.

**Table 32. Comparison Between the Disabled Population and the Total Population by Number of Persons in the Household by Sex by Age Groups, Canada**

Population/Sex/ Age Group	Total	Number of Persons in the Household		
		One Person	Two Persons %	Three or More Persons
<b>Total Population<sup>1</sup></b>				
<b>Both sexes</b>				
All ages	19,483,865	10.0	26.5	63.5
15 to 24 years	4,101,550	4.2	16.2	79.7
25 to 44 years	8,078,590	7.9	19.4	72.7
45 to 64 years	4,818,950	9.1	34.7	56.1
65 and over	2,484,775	27.8	50.5	21.7
<b>Males</b>				
All ages	9,526,525	8.4	26.0	65.6
15 to 24 years	2,068,985	4.1	13.9	82.0
25 to 44 years	4,019,715	9.7	18.9	71.4
45 to 64 years	2,365,810	7.4	32.1	60.4
65 and over	1,072,020	14.4	62.1	23.5
<b>Females</b>				
All ages	9,957,335	11.5	27.0	61.6
15 to 24 years	2,032,565	4.3	18.4	77.3
25 to 44 years	4,058,875	6.2	19.9	73.9
45 to 64 years	2,453,140	10.8	37.3	52.0
65 and over	1,412,755	38.0	41.8	20.2
<b>Disabled Population</b>				
<b>Both sexes</b>				
All ages	2,794,550	18.7	37.7	43.6
15 to 24 years	181,325	6.0	15.5	78.6
25 to 44 years	623,790	11.4	20.7	67.9
45 to 64 years	962,525	13.7	40.4	45.9
65 and over	1,026,915	30.0	49.4	20.6
<b>Males</b>				
All ages	1,326,305	11.7	40.3	47.9
15 to 24 years	93,685	2.7	14.2	83.1
25 to 44 years	314,495	13.5	17.1	69.4
45 to 64 years	480,510	10.0	39.6	50.4
65 and over	437,615	14.3	63.4	22.3
<b>Females</b>				
All ages	1,468,245	25.0	35.3	39.7
15 to 24 years	87,640	9.5	16.8	73.7
25 to 44 years	309,295	9.3	24.4	66.3
45 to 64 years	482,015	17.4	41.2	41.4
65 and over	589,295	41.7	38.9	19.4

<sup>1</sup> Total Population includes all persons aged 15 and over residing in households.

**Table 33. Comparison Between the Disabled Population and the Total Population by Household Structure by Sex by Age Groups, Canada**

Population/Sex/ Age Group	Total	Household Structure		
		Living Alone	Living With a Spouse %	Living With Others
<b>Total Population<sup>1</sup></b>				
<b>Both sexes</b>				
All ages	19,483,865	10.0	60.3	29.7
15 to 24 years	4,101,550	4.2	15.9	79.9
25 to 44 years	8,078,590	7.9	73.7	18.4
45 to 64 years	4,818,950	9.1	77.7	13.2
65 and over	2,484,775	27.8	56.1	16.1
<b>Males</b>				
All ages	9,526,525	8.4	61.9	29.6
15 to 24 years	2,068,985	4.1	10.5	85.4
25 to 44 years	4,019,715	9.7	72.1	18.2
45 to 64 years	2,365,810	7.4	82.7	9.9
65 and over	1,072,020	14.4	77.0	8.6
<b>Females</b>				
All ages	9,957,335	11.5	58.7	29.8
15 to 24 years	2,032,565	4.3	21.5	74.2
25 to 44 years	4,058,875	6.2	75.2	18.6
45 to 64 years	2,453,140	10.8	72.8	16.4
65 and over	1,412,755	38.0	40.3	21.7
<b>Disabled Population</b>				
<b>Both sexes</b>				
All ages	2,794,550	18.7	57.5	23.8
15 to 24 years	181,325	6.0	17.3	76.8
25 to 44 years	623,790	11.4	61.6	27.0
45 to 64 years	962,525	13.7	69.7	16.6
65 and over	1,026,915	30.0	50.7	19.2
<b>Males</b>				
All ages	1,326,305	11.7	67.7	20.6
15 to 24 years	93,685	2.7	12.1	85.3
25 to 44 years	314,495	13.5	61.6	24.9
45 to 64 years	480,510	10.0	76.2	13.8
65 and over	437,615	14.3	74.6	11.1
<b>Females</b>				
All ages	1,468,245	25.0	48.3	26.7
15 to 24 years	87,640	9.5	22.8	67.7
25 to 44 years	309,295	9.3	61.5	29.1
45 to 64 years	482,015	17.4	63.2	19.3
65 and over	589,295	41.7	33.0	25.3

*1 Total Population includes all persons aged 15 and over residing in households.*

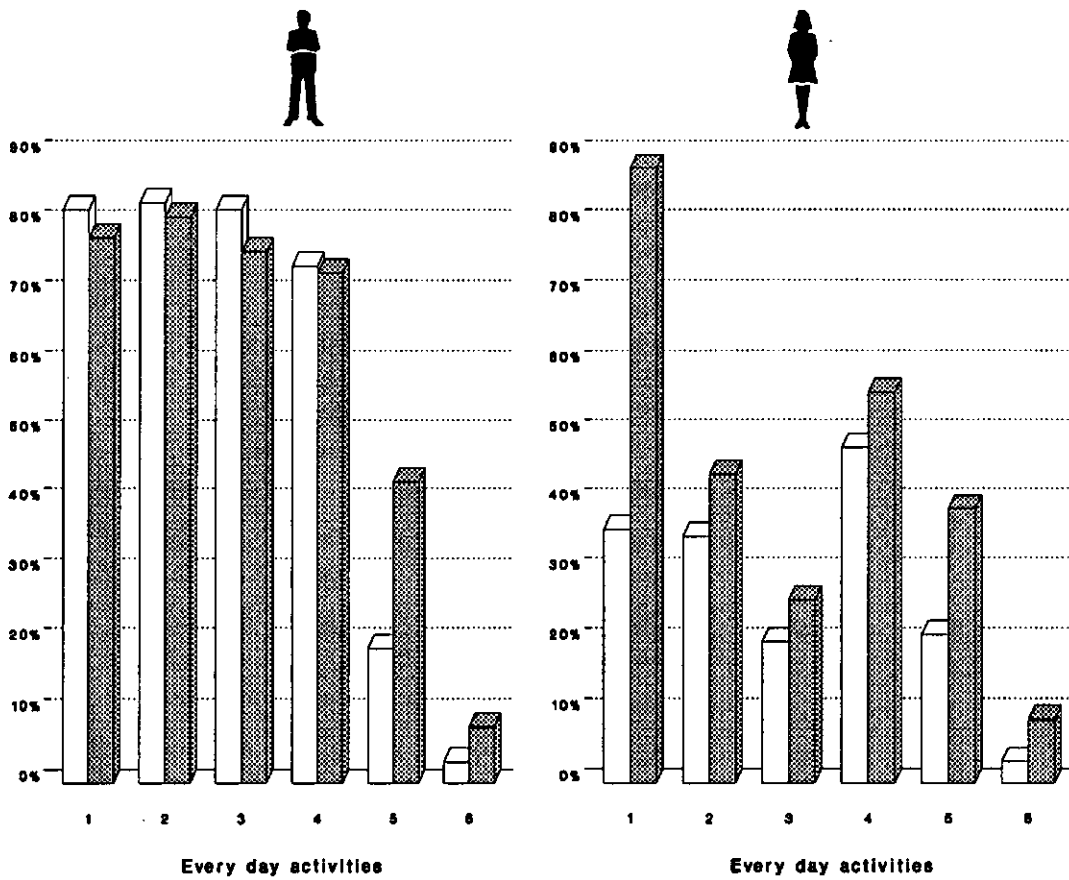


Table 33 shows that the percentage of persons living with a spouse is similar in both populations. This varies slightly with age, and with sex: more men live with a spouse within the disabled population than in the total population (68% compared to 62%), although this changes in the older age groups. Disabled women are less likely to live with a spouse and this remains consistent, regardless of age.

The General Social Survey included a series of questions on the performance of a number of everyday activities, similar to those asked in the HALS. However, these questions were directed only to respondents 55 or over. Figure 6, therefore, presents a comparison of the percentage of help received by the total population and by the disabled population for those 55 and over. In general, a greater need for help is noted among the disabled, but no major differences. Management of personal finances, heavy household chores and personal care are the activities showing the greatest differences. These differences vary in relation to sex. In the case of everyday housework and meal preparation there are proportionally more women who need help within the disabled population than in the total population. The data for males indicate that the proportion who need help with most activities is greater among men in the total population than among men with disabilities. On the other hand, there is a greater need among the disabled population with respect to management of personal finances and personal care, with little difference by sex. For heavy household chores, the differences between the disabled population and the total population are much more marked among women.

**Figure 6. Percentage of the Disabled Population (HALS) and the Total Population (GSS) Aged 55 and Over Receiving Help with Everyday Activities by Sex, Canada**

GSS - General Social Survey, 1985 (general population)  
 HALS - Health and Activity Limitation Survey (disabled population)



<b>Activity 1:</b> Heavy household chores	<b>Activity 4:</b> Shopping
<b>Activity 2:</b> Normal household chores	<b>Activity 5:</b> Finances
<b>Activity 3:</b> Meals	<b>Activity 6:</b> Personal Care

**Appendix A**  
**HALS Questionnaire**  
**Sections C and H**



SECTION C - SOCIAL SERVICES

The next group of questions deals with how you manage everyday activities.

C1 Who usually prepares your meals?

**INTERVIEWER: Read list. Mark only one.**

- Yourself alone ..... 1  → Go to C9
- Yourself and someone else..... 2
- Someone else ..... 3

C2 Is this because of your condition or health problem?

- Yes 4  No 5  → Go to C10

C3 Are you helped by your spouse, parent, child or some other relative?

- Yes 6  → C4 How often does he/she help you?
  - No 7  ↓
- C4 How often does he/she help you?

  - every day ..... 1
  - once a week or more ..... 2
  - less than once a week ..... 3

C5 Are you helped by a friend or neighbour?

- Yes 4  → C6 How often does he/she help you?
  - No 5  ↓
- C6 How often does he/she help you?

  - every day ..... 6
  - once a week or more ..... 7
  - less than once a week ..... 8

C7 Are you helped by someone else, for example, home care, meals-on-wheels or privately employed help?

- Yes 1  → C8 How often do you receive this service?
  - No 2  ↓
- C8 How often do you receive this service?

  - every day ..... 3
  - once a week or more ..... 4
  - less than once a week ..... 5

C9 Because of your condition, do you need help or additional help in preparing your meals?

- Yes 6  No 7

C10 Who usually does your shopping for groceries or other necessities?

**INTERVIEWER: Read list. Mark only one.**

- Yourself alone ..... 1  → Go to C18
- Yourself and someone else..... 2
- Someone else ..... 3

C11 Is this because of your condition or health problem?

- Yes 4  No 5  → Go to C19

C12 Are you helped by your spouse, parent, child or some other relative?

- Yes 6  → C13 How often does he/she help you?
  - No 7  ↓
  - Go to C14
- C13 How often does he/she help you?

  - every day ..... 1
  - once a week or more ..... 2
  - less than once a week ..... 3

C14 Are you helped by a friend or a neighbour?

- Yes 4  → C15 How often does he/she help you?
  - No 5  ↓
- C15 How often does he/she help you?

  - every day ..... 6
  - once a week or more ..... 7
  - less than once a week ..... 8

C16 Are you helped by someone else, for example, home care, attendant care or privately employed help?

- Yes 1  → C17 How often do you receive this service?
  - No 2  ↓
- C17 How often do you receive this service?

  - every day ..... 3
  - once a week or more ..... 4
  - less than once a week ..... 5

C18 Because of your condition, do you need help or additional help in shopping for groceries or other necessities?

- Yes 6  No 7

C19 Who usually does your normal everyday housework?

**INTERVIEWER: Read list. Mark only one.**

- Yourself alone ..... 1  → Go to C27
- Yourself and someone else..... 2
- Someone else ..... 3

C20 Is this because of your condition or health problem?

- Yes 4  No 5  → Go to C28

C21 Are you helped by your spouse, parent, child or some other relative?

- Yes 6  → C22 How often does he/she help you?
  - No 7  ↓
- C22 How often does he/she help you?

  - every day ..... 1
  - once a week or more ..... 2
  - less than once a week ..... 3

C23 Are you helped by a friend or neighbour?

- Yes 4  → C24 How often does he/she help you?
  - No 5  ↓
- C24 How often does he/she help you?

  - every day ..... 6
  - once a week or more ..... 7
  - less than once a week ..... 8

C25 Are you helped by someone else for example, home care service or privately employed help?

- Yes 1  → C26 How often do you receive this service?
  - No 2  ↓
- C26 How often do you receive this service?

  - every day ..... 3
  - once a week or more ..... 4
  - less than once a week ..... 5



C52 How do you move about within your own residence?

INTERVIEWER: Read list. Mark only one.

By yourself ..... 1 ○ → Go to C59

Sometimes by yourself and sometimes with the help of another person ..... 2 ○ } Go to C53

Only with the help of another person ..... 3 ○ }

Not at all, because of your condition or health problem ..... 4 ○ → Go to C59

C53 Are you helped by your spouse, parent, child or some other relative?

Yes 5 ○ → C54 How often does he/she help you?

No 6 ○  
every day ..... 7 ○  
once a week or more ..... 8 ○  
less than once a week ..... 9 ○

C55 Are you helped by a friend or neighbour?

Yes 1 ○ → C56 How often does he/she help you?

No 2 ○  
every day ..... 3 ○  
once a week or more ..... 4 ○  
less than once a week ..... 5 ○

C57 Are you helped by someone else, for example home care, attendant care, or privately employed help?

Yes 1 ○ → C58 How often do you receive this service?

No 2 ○  
every day ..... 3 ○  
once a week or more ..... 4 ○  
less than once a week ..... 5 ○

C59 Because of your condition, do you need help or additional help moving about within your own residence?

Yes 6 ○ No 7 ○

C60 How many times have you been hospitalized in the last 12 months?

(if none, enter 00)

C61 Because of your condition or health problem, how often in the last three months have you seen a . . .

INTERVIEWER: Read list. Mark all that apply.

Number of times (if none, enter 00)

physician/medical doctor? .....

chiropractor? .....

nurse? .....

physio/occupational/speech/therapist? .....

other health professional or technician, such as dietitian, psychologist, X-ray or lab technician, optician, dentist? .....

GO TO SECTION D

SECTION H - RECREATION AND LIFESTYLES

**H1** Now I would like to ask you some questions about activities you do in your leisure time. How many hours per week do you usually spend doing the following activities in your residence?

	0 hours	1 to 7 hours per week	8 hours or more per week
Watching television, listening to radio, records or tapes, or reading .....	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
Talking on the telephone .....	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
Arts, crafts, gardening or other hobbies .....	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>
Social activities with family or friends....	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>

**H2** How often per month do you usually participate in the following activities outside your residence?

	Never	1 to 4 times a month	5 times or more a month
Visiting friends or relatives .....	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
Attending sporting events, concerts, plays or movies .....	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
Going to museums, historic sites, libraries or art galleries .....	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>
Taking courses, attending seminars .....	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
Shopping .....	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>
Attending religious activities or doing volunteer work .....	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
Visiting national or provincial parks....	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>
Other activities such as going to bingos or clubs, or playing cards .....	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>

**H3** Regarding these leisure activities outside your residence, are you satisfied with the amount you are doing or would you like to do more?

Satisfied 1  → Go to H5  
 Would like to do more 2

**H4** What prevents you from doing more of these leisure activities?

**INTERVIEWER:** Read list. Mark all that apply.

- Need someone's help ..... 1
- Need special aid, such as a brace or wheelchair ..... 2
- Inadequate transportation ..... 3
- Location too far away ..... 4
- Facilities not suitable to condition or health problem ..... 5
- Physically unable to do more ..... 6
- Cost too high ..... 7
- Other ..... 8

**H5** Now I would like to ask you some questions about physical activity, sports or exercise that you do during your leisure time, for example, walking, jogging, swimming, or bicycling.

Do you take part in some physical activity during your leisure time?

Yes 3  No 4  → Go to H7

**H6** How often do you usually take part in some physical activity during your leisure time?

**INTERVIEWER:** Read list. Mark only one.

- Less than once a month ..... 5
- 1 to 3 times a month ..... 6
- 1 or 2 times a week ..... 7
- 3 times a week or more ..... 8

**H7** Do you want to participate in more physical activities than you do now?

Yes 1  No 2  → Go to H9

**H8** What prevents you from doing more physical activity? Name at most three reasons.

**INTERVIEWER:** Show "Q" Card.

- Self conscious/ill at ease ..... 1
- Lack of support of family or friends ... 2
- Lack of nearby facilities or programs. 3
- Facilities, equipment or programs not adapted to my needs ..... 4
- Inadequate transportation ..... 5
- Physically unable to do more ..... 6
- Cost too high ..... 7
- Other ..... 8

**H9** Do you smoke cigarettes?

**INTERVIEWER:** Read list. Mark only one.

- Not at all ..... 3
- Regularly, that is usually every day. 4
- Occasionally, not every day ..... 5

**H10** In the past twelve months, have you taken a drink of beer, wine or other alcoholic beverage?

**INTERVIEWER:** Read list. Mark only one.

- No: Never ..... 1
- Yes: Every day ..... 2
- 4 to 6 times a week ..... 3
- 2 to 3 times a week ..... 4
- Once a week ..... 5
- Once or twice a month ..... 6
- Less than once a month ..... 7



H11 In general, would you say that your eating habits are ...

**INTERVIEWER:** Read list. Mark only one.

- excellent? ..... 1
- very good? ..... 2
- good? ..... 3
- fair? ..... 4
- poor? ..... 5
- don't know ..... 6

H12 What could you do, if anything, to improve your eating habits?

**INTERVIEWER:** Read list. Mark only one.

- Eat more food ..... 1
- Eat less food ..... 2
- Eat a greater variety of foods ..... 3
- Eat at more regular intervals ..... 4
- Nothing ..... 5
- Don't know ..... 6



**Appendix B**  
**Sample Design**



## Sample Design

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### Sample Design Considerations

The Health and Activity Limitation Survey consists of two distinct samples: **households and institutions**. A **household** is a person or group of persons (other than foreign residents) who occupy a dwelling and do not have a usual place of residence elsewhere in Canada. It usually consists of a family group with or without lodgers, employees, etc. However, it may consist of two or more families sharing a dwelling, a group of unrelated persons, or one person living alone. Some types of collective dwellings, such as hotels, motels, YM/YWCAs and school residences, were included in the household sample if the occupants had no other usual place of residence. Household members who are temporarily absent (e.g., temporary residents elsewhere) are considered as part of their usual household. As in the census, every person is a member of one and only one household.

The individuals residing in households who participated in HALS were identified through their response to the disability question on the 1986 Census long questionnaire which was completed by 20% of Canadian households. This disability question was general in nature and asked the respondents to indicate if they were limited in the kind or amount of activity they could undertake because of a health problem or condition. This question had been used in a previous disability survey, and the results indicated that it would identify the severely disabled population, and some of the less severely disabled population. Some of the less severely disabled would answer "No" to the census disability question.

Approximately 112,000 individuals who answered "Yes" to this disability question were subsequently selected to represent disabled persons of all ages. The questions posed included questions on trouble with or inability to perform daily activities to determine, with more specificity, if they had any long-term limitations because of their health problem or condition. These questions on daily activities (referred to later in this text as screening questions) also identified the nature and severity of the individual's disability. Approximately 22,040 of the 112,000 individuals who had responded that they had a limitation in their activities on the census stated that they had no trouble in performing any of the daily activities in the subsequent follow-up. As this indicated that these individuals had no long-term limitation (disability), they were excluded from the disabled population estimates. Of the 112,000 individuals, approximately 11,735 were non-respondents.

Because of the possibility that some less severely disabled persons might have answered "No" to the census disability question, an additional 72,500 individuals who answered "No" to the census disability question were also selected. Through a telephone interview, these individuals were asked the same detailed screening questions. Approximately 3,910 individuals responded positively to the detailed screening questions, and these individuals were included as disabled in the survey. It should be noted, as expected, that subsequent analysis of these 3,910 individuals indicated that they are younger and less severely disabled, and that they experience fewer barriers as a result of their disability than the sample who responded "Yes" to the census disability question. Of the 72,500 individuals, approximately 5,270 were non-respondents.

A more complete description of the sample design and the differences between the two household samples is available from the Post-Censal Surveys Program, or through the Statistics Canada Regional Offices.

A sample of approximately 20,000 individuals who resided in health-related institutions was also selected to ensure that all disabled persons were represented in the sample.

The five types of institutions included in HALS were:

- orphanages and children's homes;
- special care homes and institutions for the elderly and chronically ill;
- general hospitals;
- psychiatric institutions; and
- treatment centres and institutions for the physically handicapped.

The 1986 Census of Population provided a list of institutions from which a sample, based on type and size, was selected within each province.

Within each selected institution, a sample of residents was selected, based on a list provided by the institution. Residents were included in the list if they were living in the institution on March 1, 1987 and had been in an institution for a continuous period of six months or more.

As HALS was a sample survey, the data presented in this publication have been weighted to estimate the total disabled population. The data shown in the table below provide the user with the distribution of the disabled population by sample type.

**Number of Disabled Persons by Sample Type**

	Number	%
1. Households sample		
• "Yes" to census disability question	1,835,980	55.3
• "No" to census disability question	1,233,620	37.2
2. Institutions sample	247,275	7.5
3. TOTAL	3,316,875	100.0

## **Data Quality**

Statistics from the HALS data base are estimates based on a sample survey of a portion of the Canadian population (approximately 1 out of every 25 persons in the "Yes" sample and 1 out of every 300 persons in the "No" sample). As a result, the statistics are subject to two types of errors: sampling and non-sampling errors.

A sampling error is the difference between the estimate derived from a sample and the result that would have been obtained from a population census using the same data collection procedures. For a sample survey such as HALS, this error can be estimated from the survey data. The degree of error reflects the standard deviation of the estimate. Data have been suppressed when the sampling error is more than 25% of the estimate. In such cases, the symbol "--" appears in the tables in place of the estimate. When the sampling error is between 16.5% and 25% the corresponding estimate is accompanied by the symbol "\*". These estimates should be used with caution.

All other types of errors (observation, response, processing and non-response errors) are called non-sampling errors. Identifying and evaluating the importance of many of these errors can be difficult.

Observation errors arise when there is a difference between the target population and the sample population. Integrating HALS with the census of population has made it possible to reduce this type of error. Only a certain portion of Indian reserves and collective dwellings were systematically ignored in the sampling process, but their importance is negligible compared to the total population. Consequently, observation errors should not have a significant influence on the HALS data.

All statistical surveys are susceptible to a certain percentage of non-response among the selected sample. A total non-response occurs when, for one reason or another, a selected respondent could not be interviewed. The non-response is said to be partial if only part of the questionnaire is complete. The impact of non-response errors on estimates depends on the level of non-response and, particularly, on any differences between the characteristics of respondents and non-respondents. In principle, the more marked these differences, the greater the impact on the accuracy of the estimates.

With respect to HALS, the response rate (90%) compares favourably with the rate generally observed for this type of survey. In addition, various methods have been used to reduce the bias caused by any total non-responses, notably by adjusting the data to reflect the distribution of certain demographic characteristics obtained by the census. As well, response rates were higher for most specific questions. In the tables, non-responses appear as "Unknown" or "Not Stated".



## **Appendix C**

### **Definitions**



## Definitions

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### Disability

*"In the context of health experience, a disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being" <sup>1</sup>*

With the development of the International Classification of Impairments, Disabilities and Handicaps, the World Health Organization has developed a framework within which one can measure the consequence of disease. The "disability" concept was operationalized through a series of questions that has come to be known as "Activities of Daily Living".<sup>2</sup>

For the purpose of the national data base on disability, the functional limitation approach has been utilized for the adult population (aged 15 and older) through the use of a modified version of the "Activities of Daily Living" questions. Individuals are not considered disabled if they use a technical aid and that aid completely eliminates the limitation, e.g. - an individual who uses a hearing aid and states that he has no limitation when using the aid would not be included in the data base. The concept of time has also been added as an additional parameter - the limitation has to be of a minimum six months duration, i.e. has lasted or is expected to last six months or more.

For children under the age of 15, the two surveys (CHDS and HALS) used a general limitation approach along with a list of chronic conditions and a list of technical aids. A positive response in any one of these categories indicates a disability.

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<sup>1</sup> *International Classification of Impairments, Disabilities and Handicaps, World Health Organization, 1980 - page 143.*

<sup>2</sup> *Special Study No. 5, Measuring Disability, O.E.C.D., 1982.*

## **Nature of Disability Defined**

- Mobility:** limited in ability to walk, move from room to room, carry an object for 10 metres, or stand for long periods.
- Agility:** limited in ability to bend, dress or undress oneself, get in and out of bed, cut toenails, use fingers to grasp or handle objects, reach, or cut own food.
- Seeing:** limited in ability to read ordinary newsprint or to see someone from 4 metres, even when wearing glasses.
- Hearing:** limited in ability to hear what is being said in conversation with one other person or two more persons, even when wearing a hearing aid.
- Speaking:** limited in ability to speak and be understood.
- Other:** limited because of learning disability or emotional or psychiatric disability, or because of developmental delay.
- Unknown:** limited by nature not specified.

## **Severity of Disability**

A severity scale for adults has been developed using the responses to the screening questions plus two additional questions on the use of aids for seeing and hearing disabilities. (For a more complete description of the scale, contact the Post-Censal Surveys Program.) The scoring was first derived by adding together the individual severity scores of all screening questions, counting one point for each partial loss of function and two points for each total loss of function (i.e. completely unable to perform the function). The total score is then categorized as follows:

mild	-	less than 5 points
moderate	-	5 - 10 points
severe	-	11 or more points

## **Appendix D**

### **Products and Publications From HALS**



## Products and Publications from HALS

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Available now.....

### Custom Data Service

The HALS Custom Data Service enables users to identify their specific requirements for data about persons with disabilities. With the help of a HALS technical advisor, these requirements are transformed into tables and/or analytical reports. The cost to produce the tables and the time required for the production is negotiated with the user.

HALS can provide information for selected cities, large municipalities, and groupings of smaller municipalities. The HALS Custom Data Service can regroup geographic areas to ensure that the specific needs of the client are satisfied.

### Publications

HALS Fact Sheets are a series of one page summaries of pertinent information from the Health and Activity Limitation Survey. Topics available now include data on Transportation, Accommodation, Recreation, Employment and Education, both at the Canada and province levels. Fact Sheets with a focus on seniors and persons with disabilities in institutions at the Canada level are also available. The Fact Sheets are available free of charge.

\*

A User's Guide has been produced to provide background information about the survey, a summary of the survey methodology, copies of all questionnaires, a list of available Census variables, and instructions for ordering tabulations through HALS Custom Data Service. There is no charge for this publication.

\*

**Disability and the Labour Market - An Analysis of Disabled Persons not in the Labour Force**, by Gary L. Cohen, (\$15.00) outlines the main factors associated with the high level of non-participation among persons with disabilities who face work limitations. The report focuses on comparisons between persons with disabilities who were active in the labour market and those who were not in the labour market.

\*

**A Profile of Three Disabled Populations**, by Gary L. Cohen, (\$15.00) divides the disabled population into three groups: those whose condition or health problem does not limit their ability to work, those who are limited but able to work and those who are completely unable to work. The report provides profiles of these three populations and outlines their similarities and their differences.

**Highlights: Disabled Persons in Canada** is a presentation of HALS data at the Canada, province and territorial level for various age groups. This includes selected demographic data for persons residing in households as well as information on the nature and severity of disability, lifestyle, out-of-pocket expenses, income and the barriers faced by persons with disabilities in the conduct of their everyday activities. Catalogue # 82-602, \$25.00 (\$30.00 outside Canada).

\*

**Subprovincial/subterritorial profiles** feature HALS data similar to those presented in Catalogue No. 82-602 above, at a more detailed geographic level.

Each profile includes data for selected census metropolitan areas (where applicable) as well as data for selected municipalities or groupings of municipalities. The series consists of:

**Subprovincial Data for...**

	Cat.#
Newfoundland	82-603
Prince Edward Island	82-604
Nova Scotia	82-605
New Brunswick	82-606
Quebec	82-607
Ontario	82-608
Manitoba	82-609
Saskatchewan	82-610
Alberta	82-611
British Columbia	82-612

**Subterritorial Data for...**

Yukon	82-613
Northwest Territories	82-614

Each publication costs \$26.00 (\$31.00 outside Canada) except for Quebec and Ontario which each cost \$30.00 (\$36.00 outside Canada). The entire series of publications are available at the reduced price of \$256.00.



## **Microdata Files**

The first microdata file contains approximately 132,000 non-identifiable records of **adults aged 15 and over**, (71,900 adults with disabilities and 60,000 non-disabled adults), **residing in households**. Tabulations on this file are possible at the Canada, province and territory level, as well as for 8 census metropolitan areas (CMA): St. John's, Halifax, Montreal, Toronto, Winnipeg, Edmonton, Calgary and Vancouver. If the record is not part of a CMA, its geographic designation (viz urban or rural) is indicated.

The cost of this microdata file, including full documentation, is \$3000. This documentation includes a record layout and a full description of the 553 variables. Standard statistical packages such as SPSS and SAS can be used to produce tabulations from this file.

\*

The second microdata file contains approximately 17,400 non-identifiable records of **disabled adults aged 15 and over residing in health-related institutions**. Tabulations on this file are possible at the Canada level (excluding Yukon and the Northwest Territories) and province level, and by type of institution consisting of two groupings: special care homes and institutions for the elderly and chronically ill, and all other institutions. The cost of this microdata file, including full documentation, is \$1,500.

\*

The third microdata file contains approximately 35,160 non-identifiable records of **disabled and non-disabled children aged 14 years and under residing in households**. Tabulations on this file are possible for Canada and the regions: East, Quebec, Ontario and West (including Yukon and the Northwest Territories). The cost of this microdata file, including full documentation, is \$1,000.

To be released in 1990.....

## **Publications**

**Special Topic Reports** - a series of nine reports. Each report examines a particular subgroup within the population with disabilities, or deals with a major aspect of life for the entire population with disabilities. In addition to this report, the series consists of:

### **The Use of Assistive Devices by Persons with Disabilities**

This report will focus on assistive devices used and needed by persons with disabilities aged 15 and older residing in households. A broad range of information will be provided including information on the specific assistive device used by type and severity of the disability. The information is presented for Canada, the provinces and territories.

### **Employment and Income Characteristics of Persons with a Disability**

This report will provide information on the association of employment and income and disability. Using data from HALS and the 1986 Census of Population, the report will examine the differences in labour market activity between the non-disabled population and the population with disabilities for persons aged 15 to 64.

The report will focus on those Canadians with disabilities who are able to work as well as those who are unable to work. It will present results for the individuals with disabilities who returned to school after the onset of their disability as well as those who did not do so.

### **Selected Socio-Economic Consequences of Disability for Women in Canada**

This report focuses on the education, labour force characteristics and income of women with disabilities. This population is compared to males with disabilities as well as to the non-disabled male and female populations. Catalogue #82-615, Volume 2, available September 12, 1990, \$ 35 (\$ 42 US in U.S.A., \$49 US other countries).

### **Disabled Children in Canada**

This report presents an analysis of the characteristics of disabled children by age group, gender and the type and severity of disability. It also examines how disabilities have affected various aspects of life such as education, leisure activities and ability to travel.

## **Barriers Confronting Seniors with Disabilities in Canada**

This report presents an analysis of the characteristics of seniors with disabilities residing both in households and institutions. For the first time in Canada, this report provides an in-depth analysis of the extent of barriers to independent living and the accomplishments in providing support to seniors with disabilities.

This report documents those barriers confronting seniors with disabilities with respect to income, education, transportation, leisure activities and recreation, as well as housing accessibility, and the availability of special aids and devices, special services and supports. Catalogue #82-615, Volume 1, available August 13, 1990, \$ 35 (\$ 42 US in U.S.A., \$ 49 US other countries).

## **Profile of Disabled Persons Residing in Health Care Institutions in Canada**

This report will profile adults with disabilities who reside in health care institutions. The severity, nature and underlying cause of the disability are examined for these persons and a comparison is made with the disabled residing in households. Some areas of analysis will include out-of-pocket expenses, mobility and sources of help for selected activities. As well, a section on children with disabilities in institutions includes analysis by gender, age group and geographic region.

## **Blindness and Visual Impairment in Canada**

This report analyses HALS data for visually impaired persons residing in households by province, age of onset, gender, severity and cause. The analysis compares the visually impaired population with the non-disabled population, for variables such as marital status, family structure, education, employment and income and participation in leisure activities. Catalogue #82-615, Volume 3, available November 13, 1990, \$ 35 (\$ 42 US in U.S.A., \$ 49 US other countries).

## **Canadians with Impaired Hearing**

This report will analyze HALS data for hearing impaired persons residing in households. It deals with the severity and cause of hearing impairments by age of onset and gender. The use of technical aids and the number and nature of other disabilities is also analyzed. The report will compare the hearing impaired population with the non-disabled population for such variables as marital status, family structure, education, employment and income.

\* \* \* \*



## **Appendix E**

### **Bibliography**



## **Bibliography**

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