



Employment and
Social Development Canada

Emploi et
Développement social Canada

Government of Canada 2019 Pilot Public Opinion Research Survey on Accessibility Employment and Social Development Canada

October 2019

Appendices

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Canada 

Government of Canada 2019 Pilot Public Opinion Research Survey on Accessibility

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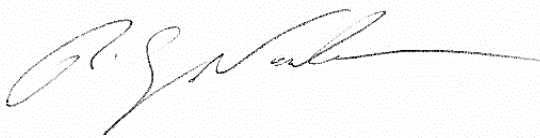


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Signed:

A handwritten signature in black ink, appearing to read "Rick Nadeau", is written over a light gray, dotted rectangular background.

Rick Nadeau, President
Quorus Consulting Group Inc.

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Appendices

General Population - CATI Questionnaire

A. INTRODUCTION AND SCREENING

Hello/Bonjour, my name is _____ and I am calling from Quorus Consulting on behalf of the Government of Canada. We are conducting (doing) a survey to learn about Canadians' experience(s) with accessibility and disability issues.

Would you prefer that I continue in English or French? Préférez-vous continuer en français ou en anglais? (**IF NEEDED:** Je vous remercie. Quelqu'un vous rappellera bientôt pour mener le sondage en français.)

English	1
Français	2

The survey takes about 15 minutes to do. You have to be 18 years of age or older to do the survey. Your responses will be kept entirely confidential and anonymous. If at any time during the survey you are not comfortable with a question, we can skip it.

IF LANDLINE SAMPLE: May I please speak with the person in your household who is 18 years of age or older and who has had the most recent birthday? Would that be you?

- **IF YES:** Would you be willing to take part in this survey? [**IF YES CONTINUE TO (A), IF NO, THANK AND TERMINATE**]
- **IF THAT PERSON IS NOT AVAILABLE ARRANGE CALLBACK**
- **IF CALL IS TRANSFERRED, RESTART INTRODUCTION**

IF CELL SAMPLE: Would you be willing to take part in this survey? [**IF YES CONTINUE, IF NO, THANK AND TERMINATE**]

Your decision to participate is up to you and will not affect your relationship with the Government of Canada or the services they provide you. This call may be monitored or recorded for quality control purposes. The information provided will be managed according to the requirements of the *Privacy Act*. The final report on the survey will be available through Library and Archives Canada.

a) Have I reached you on your cellphone?

Yes	1	
No	2	[SKIP TO AGE]

b) Are you in a place where you are comfortable to continue with the survey?

Yes	1	
No	2	[RESCHEDULE: <i>When would it be more convenient for me to call back?</i>]

AGE. In what year were you born? [Record year – XXXX]

[IF PREFERS NOT TO PROVIDE A PRECISE BIRTH YEAR, ASK:]

Would you be willing to tell me in which of the following age categories you belong? [READ LIST]

18 to 24	1
25 to 34	2
35 to 44	3
45 to 54	4
55 to 64	5
65 to 74	6
OR 75 or older?	7
[DO NOT READ] Refused	99

[RESPONDENT MUST BE AT LEAST 18 YEARS OF AGE TO CONTINUE]

PROVINCE/TERRITORY. In which province or territory do you currently live? [DO NOT READ LIST]
LIST OF PROVINCES AND TERRITORIES

GENDER. What is your gender? [DO NOT READ LIST]

Male	1
Female	2
Non-binary	3
Other gender identity (please describe):	4
Don't know/Refused	99

B. Self-identifying Disability Questions

1. Do you identify as a person with a disability?

Yes	1
No	2
Refuse to Answer	98
Don't know	99

[FOR EACH "YES" IN Q2, ASK Q3 IMMEDIATELY AFTER THEY ANSWER "YES". FOR "RARELY" OR "NEVER" IN Q3, ASK Q4, THEN CONTINUE TO NEXT ITEM IN Q2]

2. I am going to list different areas and types of disabilities. These disabilities could be permanent, temporary, or episodic – meaning that they change over time. Please answer **YES** or **NO** if you have had that type of disability.

a. Seeing - also known as visual impairment, it affects a person's ability to see - even when wearing glasses or contact lenses.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3a. IF "YES": How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4a. IF "RARELY" OR "NEVER": How much difficulty do you have seeing, even when wearing glasses or contact lenses? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You are blind or legally blind	4
Prefer not to answer [DO NOT READ]	99

b. Hearing - also known as Deaf or Hard of Hearing, it affects a person's ability to hear - even when using a hearing aid.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3b. **IF "YES"**: How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4b. **IF "RARELY" OR "NEVER"**: How much difficulty do you have hearing, even when using a hearing aid? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You are deaf	4
Prefer not to answer [DO NOT READ]	99

c. Mobility - also known as a physical disability, it affects a person's ability to move.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3c. IF **“YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4c. IF **“RARELY” OR “NEVER”**: How much difficulty do you have with mobility? Would you say.... [READ ENTIRE SCALE]

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You require mobility aids	4
Prefer not to answer [DO NOT READ]	99

d. Flexibility - also known as a physical disability, it affects a person’s ability to move their joints.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3d. IF **“YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4d. IF **“RARELY” OR “NEVER”**: How much difficulty do you have with flexibility? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot do at all	4
Prefer not to answer [DO NOT READ]	99

e. Dexterity - also known as a physical disability, it affects a person’s ability to do tasks, especially with their hands.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3e. IF **“YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4e. IF **“RARELY” OR “NEVER”**: How much difficulty do you have with grasping small objects? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot do at all	4
Prefer not to answer [DO NOT READ]	99

f. Pain - also known as chronic pain disorder, it affects a person's ability to function due to pain.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3f. **IF "YES"**: How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4f. **IF "RARELY" OR "NEVER"**: How much difficulty do you have with pain that is always present or with recurring periods of pain? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function due to pain	4
Prefer not to answer [DO NOT READ]	99

g. Learning - also known as learning disabilities, it affects the way a person receives, understands, and uses information.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3g. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4g. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with learning? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You require accommodation and support	4
Prefer not to answer [DO NOT READ]	99

h. Developmental - also known as intellectual disabilities, it affects a person’s ability to learn and to adapt their behaviour to different situations.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3h. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4h. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with this condition? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer [DO NOT READ]	99

i. Memory - also known as a memory disorder, it affects a person’s ability to remember information.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3i. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4i. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with your memory? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You experience significant memory loss	4
Prefer not to answer [DO NOT READ]	99

j. Mental health-related - also known as mental illness, it affects a person's psychology or their behavior.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3j. **IF "YES"**: How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4j. **IF "RARELY" OR "NEVER"**: How much difficulty do you have with your mental health condition? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer [DO NOT READ]	99

k. Communication - also known as a communication disorder, it affects a person's ability to receive, understand, and respond to communication with others.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3k. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4k. **IF “RARELY” OR “NEVER”**: How much difficulty do you have communicating? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot communicate without support or technology	4
Prefer not to answer [DO NOT READ]	99

I. Speech - also known as a speech disorder, it affects the way a person makes sounds to form words.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3l. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4l. IF **“RARELY” OR “NEVER”**: How much difficulty do you have speaking?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot speak at all	4
Prefer not to answer [DO NOT READ]	99

m. Language - also known as a language-based disability, it affects a person’s ability to understand and use spoken and written language.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3m. IF **“YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4m. IF **“RARELY” OR “NEVER”**: How much difficulty do you have with your language-based disability? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot use or understand language at all	4
Prefer not to answer [DO NOT READ]	99

n. Do you believe you have any other type of disability? If so, please describe it.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3n. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4n. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with this other type of disability?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer [DO NOT READ]	99

[IF “YES” TO ANY ITEM IN Q2 AND IF Q3 EQUALS SOMETIMES/OFTEN/ALWAYS - RESPONDENT IS SCREENED INTO DISABILITY SEGMENT – CONTINUE WITH Q5 IN THE “DISABILITY SEGMENT” VERSION OF THE QUESTIONNAIRE]

[IF “YES” TO ANY ITEM IN Q2, RARELY OR NEVER IN Q3, AND IF Q4 EQUALS SOME DIFFICULTY/ A LOT OF DIFFICULTY / CANNOT DO - RESPONDENT IS SCREENED INTO DISABILITY SEGMENT – CONTINUE WITH Q5 IN THE “DISABILITY SEGMENT” VERSION OF THE QUESTIONNAIRE]

[IF “YES” IN Q2H TO HAVING A DEVELOPMENTAL DISABILITY RESPONDENT IS SCREENED INTO DISABILITY SEGMENT – CONTINUE WITH Q5 IN THE “DISABILITY SEGMENT” VERSION OF THE QUESTIONNAIRE]

5. Are you, or have you been in the past, the caregiver or legal guardian of a person with a disability?

Yes – you are one today	1
Yes – you have been one in the past but you are not one today	2
No	3
Refuse to Answer	98
Don’t know	99

6. How often do you interact with a person who has a disability? Would you say ... [\[READ LIST\]](#)

Every day	1
Every few days	2
Once a week	3
A few times a month	4
Rarely, or,	5
Never	6
Refuse to Answer	98
Don't know	99

C. [BILL C-81: ACCESSIBLE CANADA ACT](#)

7. Have you seen, read, or heard anything about the Government of Canada's recently tabled Bill C-81, the proposed Accessible Canada Act, and its purpose?

Yes	1	
No	2	=> SKIP TO Q8
Refuse to Answer	98	=> SKIP TO Q8
Don't know	99	=> SKIP TO Q8

8. What can you remember about this Act? What comes to mind? [\[ACCEPT MULTIPLE RESPONSES\]](#)

ENTER EXACT RESPONSE	77
Refuse to answer	98
Don't know / Can't think of any	99

9. As far as you know...

- ...does your province or territory have accessibility legislation (or laws) or an accessibility strategy (or plan)?
- ...does your municipality have accessibility bylaws, strategies, policies or programs?

Yes	1
No	2
Refuse to Answer	98
Don't know	99

D. Awareness and Understanding of Disability

10. Different people have different views on a topic like disability. In this section, I am simply looking for your understanding of barriers to accessibility. A barrier means anything that might prevent a person with a disability from fully and equally taking part in society.

First of all, how would you rate your own understanding of what a disability is, using a scale from 0 to 10, where 10 means you understand the idea extremely well and 0 means you do not understand it at all?

RATE: 0 – 10

Don't know / Refuse to answer 99

11. And using the same scale, how would you rate your own understanding of the types of barriers that Canadians with a disability may encounter?

IF NEEDED: Using a scale from 0 to 10, where 10 means you understand the idea extremely well and 0 means you do not understand it at all.

RATE: 0 – 10 => SKIP TO Q12 IF 0

Don't know / Refuse to answer 99 => SKIP TO Q12

12. Can you describe for me the top three barriers you think Canadians with disabilities face?

ENTER EXACT RESPONSE 77

Refuse to answer 98

Don't know / Can't think of any 99

13. Now let's talk about situations where you might find barriers. These can include physical barriers, communication barriers, attitude barriers, technology barriers, or barriers caused by a policy or a practice.

Sometimes people with disabilities are treated badly or differently because of ideas and beliefs – or attitudes – that other people have about disability. This is called an 'attitude barrier.'

Before participating in this study, had you heard of this type of barrier before?

Yes 1

No 2

Refuse to Answer 98

Don't know 99

PROGRAMMER NOTE - SCALE FOR Q13 TO Q17:

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Not applicable	97
[DO NOT READ] Refuse to answer	98
[DO NOT READ] Don't know	99

14. Now, thinking about employment, over the past 12 month, how often did you witness the following situations related to employment due to accessibility.

- a. There was a barrier to **being hired** for a person with a disability? Would you say this happened... [READ LIST]

[IF ASKED: This could include anything ranging from an attitude barrier to the job application not being accessible online.]

- b. There was a barrier to finding **meaningful work** for a person with a disability? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This could include work that people find rewarding or that has purpose or that they enjoy.]

- c. There was a barrier to **moving up in an organization** for a person with a disability? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This could include situations like not getting a promotion or a permanent position.]

- d. There was a barrier to **having access to supports or workplace accommodations** for a person with a disability? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This can range from not being able to work from home to an inaccessible workstation for a person using a wheelchair.]

15. And over the past 12 months, how often did you witness a situation where there was a barrier that limited someone's ability to **move in and around public buildings and spaces**? Would you say... [REPEAT LIST IF NEEDED]

[IF ASKED: For example, this could include a wheelchair accessible entrance only available at the back, or an elevator without Braille on its buttons for a person with a visual disability.]

16. And over the past 12 months, how often did you witness the following travel-related situations:

- a. There was a barrier for a person with a disability related to the use of **municipal public transit**? Would you say this happened... [REPEAT LIST IF NEEDED]
- b. There was a barrier for a person with a disability related to the use of **taxis and ridesharing** – such as Uber or Lyft? Would you say this happened... [REPEAT LIST IF NEEDED]
- c. There was a barrier for a person with a disability related to the use of **school transportation**? Would you say this happened... [REPEAT LIST IF NEEDED]
- d. There was a barrier for a person with a disability related to the use of **ferries**? Would you say this happened... [REPEAT LIST IF NEEDED]
- e. There was a barrier for a person with a disability related to the use of **VIA Rail or Interprovincial trains** (at the train station, the train, or equipment, communication or services)? Would you say this happened... [REPEAT LIST IF NEEDED]
- f. There was a barrier for a person with a disability related to **travelling by air** (at the airport, airplane, terminal, facilities, equipment, communication, or services)? Would you say this happened?...[REPEAT LIST IF NEEDED]
- g. There was a barrier for a person with a disability related to the use of **buses that cross borders – for example between provinces and territories** (at the bus stations, on the bus, equipment, communication, or services)? Would you say this happened... [REPEAT LIST IF NEEDED]

17. And over the past 12 months, how often did you witness the following situations related to information and communication technology:

- a. There was a barrier because a **website** was not accessible for someone you know? Would you say this happened... [REPEAT LIST IF NEEDED]
[IF ASKED: For example, the website had no alternate text or would not work with an accessibility device.]
- b. There was a barrier to using a **wireless service** because it was not accessible for someone you know? Would you say this happened... [REPEAT LIST IF NEEDED]
[IF ASKED: This refers to any barrier using a device or service obtained in Canada.]
- c. There was a barrier to using **self-service technology in a public place** because it was not accessible for someone you know? Would you say this happened... [REPEAT LIST IF NEEDED]
[IF ASKED: For example, while using an ATM, a self-service checkout, or an information kiosk.]
- d. There was a barrier to **watching cable** because it was not accessible for someone you know? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.]

- e. There was a barrier to **watching a show on a streaming service such as Netflix, AppleTV, Crave, Amazon Prime, or a similar service** because it was not accessible for someone you know? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.]

- f. There was a barrier to **watching a video on the internet**, for example on YouTube, Facebook, other social media or websites, because it was not accessible for someone you know? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.]

18. And over the past 12 months, how often did you witness the following situations related to program and service delivery:

- a. There was a barrier for a person with a disability that impacted the accessibility of a **government program or service**? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This would include situations where a person with a disability did not have access to information, customer service, or resources in their preferred method of communication or at the same level of quality as anyone without a disability.]

- b. There was a barrier for a person with a disability that impacted the accessibility of a **program or service provided by a company or an organization**? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This would include situations where a person with a disability did not have access to information, customer service, or resources in their preferred method of communication or at the same level of quality as anyone without a disability.]

E. DEMOGRAPHICS

We have just a few final demographic questions that will be used to help us analyze the survey results. I want to remind you that your answers are completely confidential and will only be used for analysis in combination with other survey respondents' answers as required by the Privacy Act.

19. What is the highest level of formal education that you have completed? [\[READ A FEW ITEMS FROM THE LIST\]](#)

Grade 8 or less	1
Some high school	2
High School diploma or equivalent	3
Registered Apprenticeship or other trades certificate or diploma	4
College certificate or diploma	5
Bachelor's degree	6
Post graduate degree above bachelor's level	7
[DO NOT READ] Prefer not to answer	99

20. Which of the following categories best describes your current employment status? Are you... [\[READ LIST - ACCEPT ONE ANSWER ONLY\]](#)

Working full-time, that is, 30 or more hours per week	1
Working part-time, that is, less than 30 hours per week	2
Self-employed	3
Unemployed, but looking for work	4
A student attending school full-time	5
Retired	6
Not in the workforce (full-time homemaker, not looking for work)	7
Other	8
[DO NOT READ] Prefer not to answer	99

21. Do you self-identify as a member of the following groups?

- a. Visible minorities.
- b. Indigenous peoples - that is a member of a First Nation, Métis or Inuit, or North American Indian.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

22. [\[IF YES TO INDIGENOUS IN Q21\]](#) Please indicate whether you belong to any of the following indigenous groups?

- a. First Nations, which includes Status and Non–Status
- b. Métis
- c. Inuk or Inuit

Yes	1
No	2
Refuse to Answer	98
Don't know	99

23. [\[IF YES TO ANY IN Q22\]](#) Do you live... [\[READ LIST\]](#)

On Reserve	1
In a Metis settlement	2
In an Inuit nunangat (pronounced like “new-none-got”)	3
None of the above (please describe)	4
[DO NOT READ] I don't know/Prefer not to answer	99

24. What is the language you first learned at home as a child and still understand? Is it... [\[READ LIST — ACCEPT ALL THAT APPLY\]](#)

English	1
French	2
Or another language such as an Indigenous language, sign language, or other world language? Please specify: _____	77
Don't know/Refused	99

25. Please stop me at the category that best describes your total household income? That is, the total income of all persons in your household combined, before taxes? [\[READ LIST – SINGLE MENTION\]](#)

Under \$20,000	1
\$20,000 to just under \$40,000	2
\$40,000 to just under \$60,000	3
\$60,000 to just under \$80,000	4
\$80,000 to just under \$100,000	5
\$100,000 to just under \$150,000	6
\$150,000 and above	7
[DO NOT READ] Refused	99

26. Which of the following best represents your living arrangements? [READ LIST – SINGLE MENTION]

- | | |
|--|----|
| You own your home or you are paying a mortgage towards owning it | 1 |
| You are renting | 2 |
| You are living with a friend or family and are not paying rent | 3 |
| You are living in an assisted living facility | 4 |
| You are living in a group home | 5 |
| You have no fixed address / homeless | 6 |
| You live in transitional housing | 7 |
| You live in a shelter | 8 |
| [DO NOT READ] Don't know/Refused | 99 |

27. To better understand how results vary by region, may I have your 6-digit postal code?

ACCEPT FIRST THREE DIGITS IF THAT IS ALL RESPONDENT IS WILLING TO GIVE

___ ___ ___ ___ ___ ___ [FORMAT A4A 5B5]

999999 – DK/NA

Those are all the questions we had for you – thank you very much for your time and have a great day!

INTERVIEWER BACK UP INFORMATION TO BE USED AS NEEDED:

IF ASKED WHETHER RESEARCH WILL BE AVAILABLE AND WHERE: The results of the survey will be made available on Library and Archives Canada once all work and reporting is complete.

IF ASKED WHEN THE RESEARCH WILL BE AVAILABLE: Six months from the completion of all active research.

IF ASKED FOR A CONTACT NAME AT ESDC: This survey is being done on behalf of Employment and Social Development Canada. If you have any questions, please contact please email NC-ACCESSIBLE-CANADA-GD@hrsdcc-rhdcc.gc.ca.

Disability Segment – CATI Questionnaire

A. INTRODUCTION AND SCREENING

Hello/Bonjour, my name is _____ and I am calling from Quorus Consulting on behalf of the Government of Canada. We are conducting (doing) a survey to learn about Canadians' experience(s) with accessibility and disability issues. Would you prefer that I continue in English or French? *Préférez-vous continuer en français ou en anglais? (IF NEEDED: Je vous remercie. Quelqu'un vous rappellera bientôt pour mener le sondage en français.)*

English	1
Français	2

The survey takes about 15 minutes to do. You have to be 18 years of age or older to do the survey. Your responses will be kept entirely confidential and anonymous. If at any time during the survey you are not comfortable with a question, we can skip it. Would you like to do the survey? *[IF YES CONTINUE, IF NO, THANK AND TERMINATE]*

Your decision to participate is up to you and will not affect your relationship with the Government of Canada or the services they provide you. This call may be monitored or recorded for quality control purposes. The information provided will be managed according to the requirements of the *Privacy Act*. The final report on the survey will be available through Library and Archives Canada.

a) Have I reached you on your cellphone?

Yes	1
No	2

b) Are you in a place where you are comfortable to continue with the survey?

Yes	1
No	2 <i>[RESCHEDULE: When would it be more convenient for me to call back?]</i>

AGE. In what year were you born? [Record year – XXXX]

[IF PREFERS NOT TO PROVIDE AN EXACT BIRTH YEAR, ASK:]

Would you be willing to tell me in which of the following age categories you belong? [READ LIST]

18 to 24	1
25 to 34	2
35 to 44	3
45 to 54	4
55 to 64	5
65 to 74	6
OR 75 or older?	7
[DO NOT READ] Refused	99

[RESPONDENT MUST BE AT LEAST 18 YEARS OF AGE TO CONTINUE]

PROVINCE/TERRITORY. In which province or territory do you currently live? [DO NOT READ LIST]

LIST OF PROVINCES AND TERRITORIES

GENDER. What is your gender? [DO NOT READ LIST]

Male	1
Female	2
Non-binary	3
Other gender identity (please describe):	4
Don't know/Refused	99

B. Self-Identifying Disability Questions

1. Do you identify as a person with a disability?

Yes	1
No	2
Refuse to Answer	98
Don't know	99

[FOR EACH "YES" IN Q2, ASK Q3 IMMEDIATELY AFTER THEY ANSWER "YES". FOR "RARELY" OR "NEVER" IN Q3, ASK Q4, THEN CONTINUE TO NEXT ITEM IN Q2]

2. I am going to list different areas and types of disabilities. These disabilities could be permanent, temporary, or episodic – meaning that they change over time. Please answer **YES** or **NO** if you have had that type of disability.

a. Seeing - also known as visual impairment, it affects a person's ability to see - even when wearing glasses or contact lenses.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3a. IF "YES": How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4a. IF "RARELY" OR "NEVER": How much difficulty do you have seeing, even when wearing glasses or contact lenses? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You are blind or legally blind	4
Prefer not to answer [DO NOT READ]	99

b. Hearing - also known as Deaf or Hard of Hearing, it affects a person's ability to hear - even when using a hearing aid.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3b. **IF "YES"**: How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4b. **IF "RARELY" OR "NEVER"**: How much difficulty do you have hearing, even when using a hearing aid? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You are deaf	4
Prefer not to answer [DO NOT READ]	99

c. Mobility - also known as a physical disability, it affects a person's ability to move.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3c. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4c. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with mobility? Would you say.... [READ ENTIRE SCALE]

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You require mobility aids	4
Prefer not to answer [DO NOT READ]	99

d. Flexibility - also known as a physical disability, it affects a person’s ability to move their joints.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3d. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4d. IF **“RARELY” OR “NEVER”**: How much difficulty do you have with flexibility? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot do at all	4
Prefer not to answer [DO NOT READ]	99

e. Dexterity - also known as a physical disability, it affects a person’s ability to do tasks, especially with their hands.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3e. IF **“YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4e. IF **“RARELY” OR “NEVER”**: How much difficulty do you have with grasping small objects? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot do at all	4
Prefer not to answer [DO NOT READ]	99

f. Pain - also known as chronic pain disorder, it affects a person's ability to function due to pain.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3f. **IF "YES"**: How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4f. **IF "RARELY" OR "NEVER"**: How much difficulty do you have with pain that is always present or with recurring periods of pain? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function due to pain	4
Prefer not to answer [DO NOT READ]	99

g. Learning - also known as learning disabilities, it affects the way a person receives, understands, and uses information.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3g. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4g. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with learning? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You require accommodation and support	4
Prefer not to answer [DO NOT READ]	99

h. Developmental - also known as intellectual disabilities, it affects a person’s ability to learn and to adapt their behaviour to different situations.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3h. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4h. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with this condition? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer [DO NOT READ]	99

i. Memory - also known as a memory disorder, it affects a person’s ability to remember information.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3i. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4i. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with your memory? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You experience significant memory loss	4
Prefer not to answer [DO NOT READ]	99

j. Mental health-related - also known as mental illness, it affects a person's psychology or their behavior.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3j. **IF "YES"**: How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4j. **IF "RARELY" OR "NEVER"**: How much difficulty do you have with your mental health condition? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer [DO NOT READ]	99

k. Communication - also known as a communication disorder, it affects a person's ability to receive, understand, and respond to communication with others.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3k. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4k. **IF “RARELY” OR “NEVER”**: How much difficulty do you have communicating? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot communicate without support or technology	4
Prefer not to answer [DO NOT READ]	99

I. Speech - also known as a speech disorder, it affects the way a person makes sounds to form words.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3l. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4l. IF “RARELY” OR “NEVER”: How much difficulty do you have speaking? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot speak at all	4
Prefer not to answer [DO NOT READ]	99

m. Language - also known as a language-based disability, it affects a person’s ability to understand and use spoken and written language.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3m. IF “YES”: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4m. IF “RARELY” OR “NEVER”: How much difficulty do you have with your language-based disability? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot use or understand language at all	4
Prefer not to answer [DO NOT READ]	99

n. Do you believe you have any other type of disability? If so, please describe it.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3n. **IF “YES”**: How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability? Would you say....

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer [DO NOT READ]	99

4n. **IF “RARELY” OR “NEVER”**: How much difficulty do you have with this other type of disability? Would you say....

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer [DO NOT READ]	99

[IF “YES” TO ANY ITEM IN Q2 AND IF Q3 EQUALS **SOMETIMES/OFTEN/ALWAYS** - RESPONDENT CONTINUES SURVEY]

[IF “YES” TO ANY ITEM IN Q2, **RARELY** OR **NEVER** IN Q3, AND IF Q4 EQUALS **SOME DIFFICULTY/ A LOT OF DIFFICULTY / CANNOT DO** - RESPONDENT CONTINUES SURVEY]

[IF “YES” IN Q2H TO HAVING A **DEVELOPMENTAL DISABILITY** - RESPONDENT CONTINUES SURVEY]

[IF RESPONDENT ANSWERS 2(NO)/98/99 TO ALL ITEMS LISTED IN Q2, THANK AND TERMINATE]

5. Do you use any equipment, aids or supports to help you with your daily activities? For example, a screen reader, hearing aids, sign language interpretation, a service animal, a mobility device, a support worker, etc.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

i. [IF “YES” TO THE PREVIOUS QUESTION] What type of equipment, aids or supports do you use?

ENTER EXACT RESPONSE	77
Refuse to answer	98
Don’t know	99

6. How difficult is it for you to communicate in the following situations – so how about...
- a. In person or face to face communications - would you say it is...
 - b. Communicating over the phone - would you say it is... [REPEAT LIST IF NEEDED]
 - c. Communicating over the Internet - would you say it is... [REPEAT LIST IF NEEDED]
 - d. Reading and understanding written materials - would you say it is... [REPEAT LIST IF NEEDED]
 - e. Writing down information - would you say it is... [REPEAT LIST IF NEEDED]

Very difficult	1
Difficult	2
Neither easy nor difficult	3
Easy, or,	4
Very easy	5
[DO NOT READ] Refuse to answer	98

7. Are you, or have you been in the past, the caregiver or legal guardian of a person with a disability?

Yes – you are one today	1
Yes – you have been one in the past but you are not one today	2
No	3
Refuse to Answer	98
Don't know	99

C. BILL C-81: ACCESSIBLE CANADA ACT

8. Have you seen, read, or heard anything about the Government of Canada's recently tabled Bill C-81, the proposed Accessible Canada Act, and its purpose?

Yes	1	
No	2	=> SKIP TO Q10
Refuse to Answer	98	=> SKIP TO Q10
Don't know	99	=> SKIP TO Q10

9. What can you remember about this Act? What comes to mind? [\[ACCEPT MULTIPLE RESPONSES\]](#)

ENTER EXACT RESPONSE	77
Refuse to answer	98
Don't know / Can't think of any	99

10. As far as you know...

- a. ... does your province or territory have accessibility legislation (or laws) or an accessibility strategy (or plan)?
- b. ... does your municipality have accessibility bylaws, strategies, policies or programs?

Yes	1
No	2
Refuse to Answer	98
Don't know	99

D. Attitudes and Experiences with Barriers

11. Different people have different views on a topic like disability. In this section, I am simply looking for your understanding of barriers to accessibility. There are no right or wrong answers.

A barrier means anything that might prevent a person with a disability from fully and equally taking part in society. This can include a physical barrier, a communication barrier, an attitude barrier, a technology barrier, or a barrier caused by a policy or a practice.

Sometimes people with disabilities are treated badly or differently because of ideas and beliefs – or attitudes – that other people have about disability. This is called an ‘attitude barrier.’

How often would you say you experience attitude barriers? Would you say it is... [\[READ LIST\]](#)

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
[DO NOT READ] Not applicable	97
[DO NOT READ] Refuse to answer	98
[DO NOT READ] Don't know	99

PROGRAMMER NOTE - SCALE FOR Q12 TO Q16:

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Not applicable	97
[DO NOT READ] Refuse to answer	98
[DO NOT READ] Don't know	99

12. Now, thinking about barriers to employment, over the past 12 months, how often did you experience the following situations related to employment due to accessibility.

a. there was a barrier to **being hired**? Would you say this happened... [READ LIST]

[IF ASKED: This could include anything ranging from an attitude barrier to the job application not being accessible online.]

b. there was a barrier to finding **meaningful work**? Would you say this happened...

[REPEAT LIST IF NEEDED]

[IF ASKED: This could include work that people find rewarding or that has purpose or that they enjoy.]

c. there was a barrier **to moving up in an organization**? Would you say this happened...

[REPEAT LIST IF NEEDED]

[IF ASKED: This could include situations like not getting a promotion or a permanent position.]

d. there was a barrier **to having access to supports or workplace accommodations**?

Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This can range from not being able to work from home to an inaccessible workstation for a person using a wheelchair.]

13. And over the past 12 months, how often did you experience a situation where there was a barrier that limited your ability to **move in and around public buildings and spaces**? Would you say... [REPEAT LIST IF NEEDED]

[IF ASKED: For example, this could include a wheelchair accessible entrance only available at the back, or an elevator without Braille on its buttons for a person with a visual disability.]

14. And over the past 12 months, how often did you experience the following travel-related situations:

a. There was a barrier related to the use of **municipal public transit**? Would you say this happened... [REPEAT LIST IF NEEDED]

- b. There was a barrier related to the use of **taxis and ridesharing** – such as Uber or Lyft? Would you say this happened... [REPEAT LIST IF NEEDED]
- c. There was a barrier related to the use of **school transportation**? Would you say this happened... [REPEAT LIST IF NEEDED]
- d. There was a barrier related to the use of **ferries**? Would you say this happened... [REPEAT LIST IF NEEDED]
- e. There was a barrier related to the use of **VIA Rail or Interprovincial trains** (at the train station, the train, or equipment, communication, or services)? Would you say this happened... [REPEAT LIST IF NEEDED]
- f. There was a barrier related to **travelling by air** (at the airport, airplane, terminal, facilities, equipment, communication, or services)? Would you say this happened... [REPEAT LIST IF NEEDED]
- g. There was a barrier related to the use of **buses that cross borders – for example between provinces and territories** (at the bus stations, on the bus, equipment, communication, or services)? Would you say this happened... [REPEAT LIST IF NEEDED]

15. And over the past 12 months, how often did you experience the following situations related to information and communication technology:

- a. There was a barrier because a **website** was not accessible for you? Would you say this happened... [REPEAT LIST IF NEEDED]
 [IF ASKED: For example, the website had no alternate text or would not work with an accessibility device.]
- b. There was a barrier to using a **wireless service** because it was not accessible for you? Would you say this happened... [REPEAT LIST IF NEEDED]
 [IF ASKED: This refers to any barrier using a device or service obtained in Canada.]
- c. There was a barrier to using **self-service technology in a public place** because it was not accessible for you? Would you say this happened... [REPEAT LIST IF NEEDED]
 [IF ASKED: For example, while using an ATM, a self-service checkout, or an information kiosk.]
- d. There was a barrier to **watching cable** because it was not accessible for you? Would you say this happened... [REPEAT LIST IF NEEDED]
 [IF ASKED: Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.]
- e. There was a barrier to **watching a show on a streaming service such as Netflix, AppleTV, Crave, Amazon Prime, or a similar service** because it was not accessible for you? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.]

- f. There was a barrier to **watching a video on the internet**, for example on YouTube, Facebook, other social media or websites, because it was not accessible for you? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.]

16. And over the past 12 months, how often did you experience the following situations related to program and service delivery:

- a. There was a barrier that impacted the accessibility of a **government program or service**? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This would include situations where a person with a disability did not have access to information, customer service, or resources in their preferred method of communication or at the same level of quality as anyone without a disability.]

- b. There was a barrier that impacted the accessibility of a **program or service provided by a company or an organization**? Would you say this happened... [REPEAT LIST IF NEEDED]

[IF ASKED: This would include situations where a person with a disability did not have access to information, customer service, or resources in their preferred method of communication or at the same level of quality as anyone without a disability.]

17. [DO NOT ASK IF ALL ITEMS IN Q12-Q16 EQUAL RARELY OR NEVER] We've covered a variety of different types of experiences. If you feel comfortable doing so, can you please describe for me a few examples of the type of barriers you have experienced in the last year, and where and how they happened? Please be as specific as possible:

- a) So what would a first example be?

ENTER EXAMPLE #1	77
Refuse to answer	98 => SKIP TO Q18
Don't Know	99 => SKIP TO Q18

- b) And would you have another example to share?

ENTER EXAMPLE #2	77
Nothing else	98
Don't Know	99

E. ACCESSING INFORMATION, INITIATIVES AND PROGRAMS RELATED TO REMOVING BARRIERS AND INCREASING ACCESSIBILITY

18. Over the past 12 months, have you tried to access any information on any government programs or services related to accessibility or disability?

Yes	1	
No	2	=> SKIP TO Q22
Refuse to answer	98	=> SKIP TO Q22

19. When it comes to finding this kind of information, how easy would you say it is? Would you say it is... [\[READ LIST\]](#)

Very difficult	1
Difficult	2
Neither easy nor difficult	3
Easy, or,	4
Very easy	5
[DO NOT READ] Refuse to Answer	98
[DO NOT READ] Don't know	99

20. And do you remember if it was a federal, provincial, territorial, or municipal program or service? [\[ACCEPT MULTIPLE MENTIONS\]](#)

Federal	1
Provincial/territorial	2
Municipal	3
Refuse to answer	98
Don't know	99

21. And do you remember the name of the programs or services?

Yes – please specify	1
No	2
Refuse to Answer	98

22. This question is based on the training and conduct of Government of Canada employees. Government of Canada employees provide equal access to services and programs to people with different disabilities, including communication disabilities. Do you think more or less needs to be done in this area? Would you say... [\[READ LIST\]](#)

Much more	1
A little more	2
No more or less	3
A little less	4
Much less	5
[DO NOT READ] Refuse to answer	98
[DO NOT READ] Don't Know	99

F. DEMOGRAPHICS

We have just a few final demographic questions that will be used to help us analyze the survey results. I want to remind you that your answers are completely confidential and will only be used for analysis in combination with other survey respondent's answers as required by the Privacy Act.

23. What is the highest level of formal education that you have completed? [\[READ A FEW ITEMS FROM THE LIST - ACCEPT ONE ANSWER ONLY\]](#)

Grade 8 or less	1
Some high school	2
High School diploma or equivalent	3
Registered Apprenticeship or other trades certificate or diploma	4
College certificate or diploma	5
Bachelor's degree	6
Post graduate degree above bachelor's level	7
[DO NOT READ] Prefer not to answer	99

24. Which of the following categories best describes your current employment status? Are you... [\[READ LIST - ACCEPT ONE ANSWER ONLY\]](#)

Working full-time, that is, 30 or more hours per week	1
Working part-time, that is, less than 30 hours per week	2
Self-employed	3
Unemployed, but looking for work	4
A student attending school full-time	5
Retired	6
Not in the workforce (full-time homemaker, not looking for work)	7
Other	8
[DO NOT READ] Prefer not to answer	99

25. Do you self-identify as a member of the following groups?

- a. Visible minorities.
- b. Indigenous peoples - that is a member of a First Nation, Métis or Inuit, or North American Indian.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

26. [\[IF YES TO Q25b\]](#) Please indicate whether you belong to any of the following indigenous groups?

- a. First Nations, which includes Status and Non-Status
- b. Métis
- c. Inuk or Inuit

Yes	1
No	2
Refuse to Answer	98
Don't know	99

[\[IF YES TO ANY IN Q26\]](#) Do you live... [\[READ LIST\]](#)

On Reserve	1
In a Metis settlement	2
In an Inuit nunangat (pronounced like "new-none-got")	3
None of the above (please describe)	4
[DO NOT READ] I don't know/Prefer not to answer	99

27. What is the language you first learned at home as a child and still understand? Is it... [\[READ LIST — ACCEPT ALL THAT APPLY\]](#)

English	1
French	2
Or another language such as an Indigenous language, sign language, or other world language? Please specify: _____	77
[DO NOT READ] Don't know/Refused	99

28. Please stop me at the category that best describes your total household income? That is, the total income of all persons in your household combined, before taxes? [READ LIST – SINGLE MENTION]

- | | |
|-----------------------------------|----|
| Under \$20,000 | 1 |
| \$20,000 to just under \$40,000 | 2 |
| \$40,000 to just under \$60,000 | 3 |
| \$60,000 to just under \$80,000 | 4 |
| \$80,000 to just under \$100,000 | 5 |
| \$100,000 to just under \$150,000 | 6 |
| \$150,000 and above | 7 |
| [DO NOT READ] Refused | 99 |

29. Which of the following best represents your living arrangements? [READ LIST – SINGLE MENTION]

- | | |
|--|----|
| You own your home or you are paying a mortgage towards owning it | 1 |
| You are renting | 2 |
| You are living with a friend or family and are not paying rent | 3 |
| You are living in an assisted living facility | 4 |
| You are living in a group home | 5 |
| You have no fixed address / homeless | 6 |
| You live in transitional housing | 7 |
| You live in a shelter | 8 |
| [DO NOT READ] Don't know/Refused | 99 |

30. To better understand how results vary by region, may I have your 6-digit postal code?

ACCEPT FIRST THREE DIGITS IF THAT IS ALL RESPONDENT IS WILLING TO GIVE

___ ___ ___ ___ ___ ___ [FORMAT A4A 5B5]

999999 – DK/NA

Those are all the questions we had for you – thank you very much for your time and have a great day!

INTERVIEWER BACK UP INFORMATION TO BE USED AS NEEDED:

IF ASKED WHETHER RESEARCH WILL BE AVAILABLE AND WHERE: The results of the survey will be made available on Library and Archives Canada once all work and reporting is complete.

IF ASKED WHEN THE RESEARCH WILL BE AVAILABLE: Six months from the completion of all active research.

IF ASKED FOR A CONTACT NAME AT ESDC: This survey is being done on behalf of Employment and Social Development Canada. If you have any questions, please email NC-ACCESSIBLE-CANADA-GD@hrsdc-rhdcc.gc.ca.

Disability Segment – Online Questionnaire

A. INTRODUCTION AND SCREENING¹

[SURVEY PARTICIPANTS WILL HAVE PRE-SELECTED THE LANGUAGE]

Thank you for taking the time to participate in this survey. This research is being conducted by Quorus Consulting on behalf of Employment and Social Development Canada (ESDC) and will help the Government of Canada learn about Canadians' experience(s) with accessibility and disability issues.

The survey takes about 15 minutes to do. You have to be 18 years of age or older to do the survey. Your responses will be kept entirely confidential and anonymous. If at any time during the survey you are not comfortable with a question, you can skip it.

Your decision to participate is up to you and will not affect your relationship with the Government of Canada or the services they provide you. The information provided will be managed according to the requirements of the *Privacy Act*. The final report on the survey will be available through Library and Archives Canada.

We would appreciate it if you could complete the survey by July 7, 2019.

If you have any questions regarding the purpose of the study, please email NC-ACCESSIBLE-CANADA-GD@hrsdc-rhdcc.gc.ca.

For all technical issues and resources to help you complete the survey, please contact Eva Gastelum, Research Manager at Quorus, at 819-923-4837, or via email at: eva@quorusconsulting.com.

[PROGRAMMING NOTE - DO NOT HAVE ANY FORCED RESPONSES IN THIS SURVEY]

Please select "Next" to begin the survey.

¹Section titles are for internal use only – they will not be shown to survey respondents

AGE. In what year were you born? [Record year – 19 __]
Refuse to answer 99

[IF “Refuse to answer” IN AGE, ASK:] In which of the following age categories do you belong?

Under 18	1	[TERMINATE]
18 to 24	2	
25 to 34	3	
35 to 44	4	
45 to 54	5	
55 to 64	6	
65 to 74	7	
OR 75 or older?	8	
Refuse to answer	99	[TERMINATE]

PROVINCE/TERRITORY. In which province or territory do you currently live?

British Columbia	1
Alberta	2
Saskatchewan	3
Manitoba	4
Northwest Territories	5
Yukon	6
Ontario	7
Quebec	8
New Brunswick	9
Nova Scotia	10
Prince Edward Island	11
Newfoundland and Labrador	12
Nunavut	13
Refuse to answer	99

GENDER. What is your gender?

Male	1
Female	2
Non-binary	3
Other gender identity (please describe): _____	4
Don't know / refuse to answer	99

B. Self-Identifying Disability Questions

1. Do you identify as a person with a disability?

Yes	1
No	2
Refuse to answer	98
Don't know	99

2. Below is a list of different areas and types of disabilities. These disabilities could be permanent, temporary, or episodic – meaning that they change over time. Please select **YES** or **NO** if you have had that type of disability.

[FOR EACH “YES” IN Q2, ASK Q3 IMMEDIATELY AFTER THEY ANSWER “YES”. FOR “RARELY” OR “NEVER” IN Q3, ASK Q4, THEN CONTINUE TO NEXT ITEM IN Q2]

a. Seeing - also known as visual impairment, it affects a person's ability to see - even when wearing glasses or contact lenses.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3a. [IF “YES” TO 2a] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4a. [IF “RARELY” OR “NEVER” TO 3a] How much difficulty do you have seeing, even when wearing glasses or contact lenses?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You are blind or legally blind	4
Prefer not to answer	99

b. Hearing - also known as Deaf or Hard of Hearing, it affects a person's ability to hear - even when using a hearing aid.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3b. [IF "YES" TO 2b] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4b. [IF "RARELY" OR "NEVER" TO 3b] How much difficulty do you have hearing, even when using a hearing aid?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You are deaf	4
Prefer not to answer	99

c. Mobility - also known as a physical disability, it affects a person's ability to move.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3c. [IF "YES" TO 2c] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4c. [IF "RARELY" OR "NEVER" TO 3c] How much difficulty do you have with mobility?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You require mobility aids	4
Prefer not to answer	99

d. Flexibility - also known as a physical disability, it affects a person's ability to move their joints.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3d. [IF "YES" TO 2d] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4d. [IF "RARELY" OR "NEVER" TO 3d] How much difficulty do you have with flexibility?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot do at all	4
Prefer not to answer	99

e. Dexterity - also known as a physical disability, it affects a person's ability to do tasks, especially with their hands.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3e. [IF "YES" TO 2e] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4e. [IF "RARELY" OR "NEVER" TO 3e] How much difficulty do you have with grasping small objects?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot do at all	4
Prefer not to answer	99

f. Pain - also known as chronic pain disorder, it affects a person's ability to function due to pain.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3f. [IF “YES” TO 2f] How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4f. [IF “RARELY” OR “NEVER” TO 3f] How much difficulty do you have with pain that is always present or with recurring periods of pain?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function due to pain	4
Prefer not to answer	99

g. Learning - also known as learning disabilities, it affects the way a person receives, understands, and uses information.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3g. [IF “YES” TO 2g] How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4g. [IF “RARELY” OR “NEVER” TO 3g] How much difficulty do you have with learning?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You require accommodation and support	4
Prefer not to answer	99

h. Developmental - also known as intellectual disabilities, it affects a person’s ability to learn and to adapt their behaviour to different situations.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3h. [IF “YES” TO 2h] How often would you say the world around you - for example physical spaces, technology, or people’s attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4h. [IF “RARELY” OR “NEVER” TO 3h] How much difficulty do you have with this condition?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer	99

i. Memory - also known as a memory disorder, it affects a person’s ability to remember information.

Yes	1
No	2
Refuse to Answer	98
Don’t know	99

3i. [IF "YES" TO 2i] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4i. [IF "RARELY" OR "NEVER" TO 3i] How much difficulty do you have with your memory?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You experience significant memory loss	4
Prefer not to answer	99

j. Mental health-related - also known as mental illness, it affects a person's psychology or their behavior.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3j. [IF "YES" TO 2j] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4j. [IF "RARELY" OR "NEVER" TO 3j] How much difficulty do you have with your mental health condition?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer	99

k. Communication - also known as a communication disorder, it affects a person's ability to receive, understand, and respond to communication with others.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3k. [IF "YES" TO 2k] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4k. [IF "RARELY" OR "NEVER" TO 3k] How much difficulty do you have communicating?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot communicate without support or technology	4
Prefer not to answer	99

l. Speech - also known as a speech disorder, it affects the way a person makes sounds to form words.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3l. [IF "YES" TO 2l] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4l. [IF "RARELY" OR "NEVER" TO 3l] How much difficulty do you have speaking?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot speak at all	4
Prefer not to answer	99

m. Language - also known as a language-based disability, it affects a person's ability to understand and use spoken and written language.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3m. [IF "YES" TO 2m] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4m. [IF "RARELY" OR "NEVER" TO 3m] How much difficulty do you have with your language-based disability?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot use or understand language at all	4
Prefer not to answer	99

n. Do you believe you have any other type of disability? If so, please describe it.

Yes	1
No	2
Refuse to Answer	98
Don't know	99

3n. [IF "YES" TO 2n] How often would you say the world around you - for example physical spaces, technology, or people's attitudes towards you - limits your inclusion in society because of this disability?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Prefer not to answer	99

4n. IF “RARELY” OR “NEVER”: How much difficulty do you have with this other type of disability?

No difficulty	1
Some difficulty	2
A lot of difficulty	3
You cannot function at all without help	4
Prefer not to answer	99

[IF “YES” TO ANY ITEM IN Q2 AND IF Q3 EQUALS **SOMETIMES/OFTEN/ALWAYS** - RESPONDENT CONTINUES SURVEY]

[IF “YES” TO ANY ITEM IN Q2, **RARELY** OR **NEVER** IN Q3, AND IF Q4 EQUALS **SOME DIFFICULTY/ A LOT OF DIFFICULTY / CANNOT DO** - RESPONDENT CONTINUES SURVEY]

[IF “YES” IN Q2H TO HAVING A **DEVELOPMENTAL DISABILITY** - RESPONDENT CONTINUES SURVEY]

[IF RESPONDENT ANSWERS 2(NO)/98/99 TO ALL ITEMS LISTED IN Q2, THANK AND TERMINATE]

5. Do you use any equipment, aids or supports to help you with your daily activities? For example, a screen reader, hearing aids, sign language interpretation, a service animal, a mobility device, a support worker, etc.

Yes	1
No	2
Refuse	98
Don’t know	99

i. [IF “YES” TO THE PREVIOUS QUESTION] What type of equipment, aids or supports do you use?

[OPEN-ENDED QUESTION]	77
Refuse to answer	98
Don’t know	99

6. How difficult is it for you to communicate in the following situations:

- a. In person or face to face communications
- b. Communicating over the phone
- c. Communicating over the Internet
- d. Reading and understanding written materials
- e. Writing down information

Very difficult	1
Difficult	2
Neither easy nor difficult	3
Easy, or,	4
Very easy	5
Don't know / refuse to answer	98

7. Are you, or have you been in the past, the caregiver or legal guardian of a person with a disability?

Yes – you are one today	1
Yes – you have been one in the past but you are not one today	2
No	3
Refuse to answer	98
Don't know	99

C. BILL C-81: ACCESSIBLE CANADA ACT

8. Have you seen, read, or heard anything about the Government of Canada's recently tabled Bill C-81, the proposed Accessible Canada Act, and its purpose?

Yes	1	
No	2	[SKIP TO Q10]
Refuse to answer	98	[SKIP TO Q10]
Don't know	99	[SKIP TO Q10]

9. What can you remember about this Act? What comes to mind?

[OPEN-ENDED QUESTION]	77
Refuse to answer	98
Don't know / can't think of any	99

10. As far as you know...

- a. ... does your province or territory have accessibility legislation (or laws) or an accessibility strategy (or plan)?
- b. ... does your municipality have accessibility bylaws, strategies, policies or programs?

Yes	1
No	2
Refuse to answer	98
Don't know	99

D. Attitudes and Experiences with Barriers

11. Different people have different views on a topic like disability. In this section, we are simply looking for your understanding of barriers to accessibility. There are no right or wrong answers.

A barrier means anything that might prevent a person with a disability from fully and equally taking part in society. This can include a physical barrier, a communication barrier, an attitude barrier, a technology barrier, or a barrier caused by a policy or a practice. Sometimes people with disabilities are treated badly or differently because of ideas and beliefs – or attitudes – that other people have about disability. This is called an ‘attitude barrier.’

How often would you say you experience attitude barriers?

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Not applicable	97
Refuse to answer	98
Don't know	99

PROGRAMMER NOTE - SCALE FOR Q12 TO Q16:

Always	1
Often	2
Sometimes	3
Rarely	4
Never	5
Not applicable	97
Refuse to answer	98
Don't know	99

12. Thinking about barriers to employment, over the past 12 months, how often did you experience the following situations related to employment due to accessibility?
- there was a barrier to **being hired**. This could include anything ranging from an attitude barrier to the job application not being accessible online.
 - there was a barrier to finding **meaningful work**. This could include work that people find rewarding or that has purpose or that they enjoy.
 - there was a barrier to **moving up in an organization**. This could include situations like not getting a promotion or a permanent position.
 - there was a barrier to **having access to supports or workplace accommodations**. This can range from not being able to work from home to an inaccessible workstation for a person using a wheelchair.
13. And over the past 12 months, how often did you experience a situation where there was a barrier that limited your ability to **move in and around public buildings and spaces**? For example, this could include a wheelchair accessible entrance only available at the back, or an elevator without Braille on its buttons for a person with a visual disability.
14. And over the past 12 months, how often did you experience the following travel-related situations:
- There was a barrier related to the use of **municipal public transit**?
 - There was a barrier related to the use of **taxis and ridesharing** – such as Uber or Lyft?
 - There was a barrier related to the use of **school transportation**?
 - There was a barrier related to the use of **ferries**?
 - There was a barrier related to the use of **VIA Rail or Interprovincial trains** (at the train station, the train, or equipment, communication, or services)?
 - There was a barrier related to **travelling by air** (at the airport, airplane, terminal, facilities, equipment, communication, or services)?
 - There was a barrier related to the use of **buses that cross borders – for example between provinces and territories** (at the bus stations, on the bus, equipment, communication, or services)?
15. And over the past 12 months, how often did you experience the following situations related to information and communication technology:
- There was a barrier because a **website** was not accessible for you? For example, the website had no alternate text or would not work with an accessibility device.

- b. There was a barrier to using a **wireless service** because it was not accessible for you? This refers to any barrier using a device or service obtained in Canada.
- c. There was a barrier to using **self-service technology in a public place** because it was not accessible for you? For example, while using an ATM, a self-service checkout, or an information kiosk.
- d. There was a barrier to **watching cable** because it was not accessible for you? Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.
- e. There was a barrier to **watching a show on a streaming service such as Netflix, AppleTV, Crave, Amazon Prime, or a similar service** because it was not accessible for you? Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.
- f. There was a barrier to **watching a video on the internet**, for example on YouTube, Facebook, other social media or websites, because it was not accessible for you? Examples of barriers could include inadequate closed captioning, lack of described video or sign-language programming, among others.

16. And over the past 12 months, how often did you experience the following situations related to program and service delivery:

- a. There was a barrier that impacted the accessibility of a **government program or service**? This would include situations where a person with a disability did not have access to information, customer service, or resources in their preferred method of communication or at the same level of quality as anyone without a disability.
- b. There was a barrier that impacted the accessibility of a **program or service provided by a company or an organization**? This would include situations where a person with a disability did not have access to information, customer service, or resources in their preferred method of communication or at the same level of quality as anyone without a disability.

17. **[DO NOT ASK IF ALL ITEMS IN Q12-Q16 EQUAL RARELY OR NEVER]** We've covered a variety of different types of experiences. If you feel comfortable doing so, can you please describe for me a few examples of the type of barriers you have experienced in the last year, and where and how they happened? Please be as specific as possible:

a) So what would a first example be?

[OPEN-ENDED QUESTION]	77	
Refuse to answer	98	[SKIP TO Q18]
Don't know	99	[SKIP TO Q18]

b) And would you have another example to share?

[OPEN-ENDED QUESTION]	77
Nothing else	98
Don't know	99

E. ACCESSING INFORMATION, INITIATIVES AND PROGRAMS RELATED TO REMOVING BARRIERS AND INCREASING ACCESSIBILITY

18. Over the past 12 months, have you tried to access any information on any government programs or services related to accessibility or disability?

Yes	1	
No	2	[SKIP TO Q22]
Refuse to answer	98	[SKIP TO Q22]

19. When it comes to finding this kind of information, how easy would you say it is?

Very difficult	1
Difficult	2
Neither easy nor difficult	3
Easy, or,	4
Very easy	5
Refuse to answer	98
Don't know	99

20. And do you remember if it was a federal, provincial, territorial, or municipal program or service? **SELECT ALL THAT APPLY**

Federal	1
Provincial / territorial	2
Municipal	3
Refuse to answer	98
Don't know	99

21. And do you remember the name of the programs or services?

Yes – please specify: _____	1
No	2
Refuse to answer	98

22. This question is based on the training and conduct of Government of Canada employees. Government of Canada employees provide equal access to services and programs to people with different disabilities, including communication disabilities. Do you think more or less needs to be done in this area?

Much more	1
A little more	2
No more or less	3
A little less	4
Much less	5
Refuse to answer	98
Don't know	99

F. DEMOGRAPHICS

We have just a few final demographic questions that will be used to help us analyze the survey results. I want to remind you that your answers are completely confidential and will only be used for analysis in combination with other survey respondent's answers as required by the Privacy Act.

23. What is the highest level of formal education that you have completed?

Grade 8 or less	1
Some high school	2
High School diploma or equivalent	3
Registered Apprenticeship or other trades certificate or diploma	4
College certificate or diploma	5
Bachelor's degree	6
Post graduate degree above bachelor's level	7
Prefer not to answer	99

24. Which of the following categories best describes your current employment status?

Working full-time, that is, 30 or more hours per week	1
Working part-time, that is, less than 30 hours per week	2
Self-employed	3
Unemployed, but looking for work	4
A student attending school full-time	5
Retired	6
Not in the workforce (full-time homemaker, not looking for work)	7
Other	8
Prefer not to answer	99

25. Do you self-identify as a member of the following groups?

- a. Visible minorities.
- b. Indigenous peoples - that is a member of a First Nation, Métis or Inuit, or North American Indian.

Yes	1
No	2
Refuse to answer	98
Don't know	99

26. [\[IF YES TO Q25b\]](#) Please indicate whether you belong to any of the following indigenous groups?

- a. First Nations, which includes Status and Non-Status
- b. Métis
- c. Inuk or Inuit

Yes	1
No	2
Refuse to answer	98
Don't know	99

27. [\[IF YES TO ANY IN Q26\]](#) Do you live...

On reserve	1
In a Metis settlement	2
In an Inuit nunangat	3
None of the above (please describe): _____	77
I don't know / prefer not to answer	99

28. What is the language you first learned at home as a child and still understand? **SELECT ALL THAT APPLY**

English	1
French	2
Or another language such as an Indigenous language, sign language, or other world language? Please specify: _____	77
Don't know / refuse to answer	99

29. Please select the category that best describes your total household income. That is, the total income of all persons in your household combined, before taxes.

- | | |
|-----------------------------------|----|
| Under \$20,000 | 1 |
| \$20,000 to just under \$40,000 | 2 |
| \$40,000 to just under \$60,000 | 3 |
| \$60,000 to just under \$80,000 | 4 |
| \$80,000 to just under \$100,000 | 5 |
| \$100,000 to just under \$150,000 | 6 |
| \$150,000 and above | 7 |
| Refuse to answer | 99 |

30. Which of the following best represents your living arrangements?

- | | |
|--|----|
| You own your home or you are paying a mortgage towards owning it | 1 |
| You are renting | 2 |
| You are living with a friend or family and are not paying rent | 3 |
| You are living in an assisted living facility | 4 |
| You are living in a group home | 5 |
| You have no fixed address / homeless | 6 |
| You live in transitional housing | 7 |
| You live in a shelter | 8 |
| Don't know / refuse to answer | 99 |

31. To better understand how results vary by region, please enter your 6-digit postal code?

[ACCEPT FIRST THREE DIGITS IF THAT IS ALL RESPONDENT IS WILLING TO GIVE]

____ _ [FORMAT A4A 5B5]

999999 – Don't know / not applicable

Those are all the questions we had for you – thank you very much for your time and have a great day!