

THE HEALTH AND ACTIVITY LIMITATION SURVEY

MICRODATA USER'S GUIDE

ADULTS IN INSTITUTIONS

Statistics Canada

January, 1990

DEDICATION

To those disabled persons and their families who took the time to answer the lengthy questionnaire - without them, this could not be -

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1. Introduction

The Health and Activity Limitation Survey (HALS) was conducted by Statistics Canada, in response to Recommendation 113 of OBSTACLES, the report from the Special Parliamentary Committee on the Disabled and the Handicapped. The survey - its content and format - was developed through extensive consultation with all levels of government in Canada, associations of and for disabled persons, and disabled persons themselves.

This manual has been produced to facilitate the manipulation of the microdata file produced from the institution survey questionnaires for adults.

Other microdata files available from the HALS survey are:

- · Disabled adults in households
- · Disabled children (aged 0 to 14 inclusive)

Any questions about the three datafiles and their uses should be directed to:

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2. Background

In May 1980, the Special Parliamentary Committee on the Disabled and the Handicapped was formed with the mandate to report to the House of Commons on the needs and concerns of disabled persons in Canada. In February 1981, the Committee published its findings in the report titled Obstacles. This report included 130 recommendations for action on the part of the Government of Canada.

It was noted throughout the Committee's investigations that there was a lack of national data on disabled persons. The Committee directed Statistics Canada, through Recommendation 113, "to give a high priority to the development and implementation of long-term strategy which will generate comprehensive data on disabled persons in Canada...".(1)

Statistics Canada responded with an action plan which outlined the major activities to be undertaken to build a national data base on disability - a data base that would include all types of disabilities and all geographic areas in Canada.

Representatives from federal, provincial and territorial departments, agencies, crown corporations, and associations of and for disabled persons were contacted to determine their specific data requirements.

Statistics Canada then undertook three major data collection activities. They were:

- (1) the conduct of the Canadian Health and Disability Survey (CHDS) as a supplement to the Labour Force Survey in October 1983 and June 1984;
- (2) the addition of a question on activity limitation on the 1986 Census of Population questionnaire to assist Statistics Canada in designing a sample frame from which to select individuals for participation in the post-censal survey, the Health and Activity Limitation Survey; and
- (3) the conduct of the **Health and Activity Limitation Survey** (HALS) which was completed in households in the fall of 1986 and in institutions in the spring of 1987.

^{(1).} Obstacles, Report of the Special Parliamentary Committee on the Disabled and the Handicapped, February, 1981 - page 131.

3. Survey Objectives

The objectives of HALS were:

- to extend the coverage of the survey to include disabled persons residing in the Yukon, the Northwest Territories, on Indian reserves and in institutions;
- to interview a sufficient number of disabled persons to enable the release of data for subprovincial areas (such as large municipalities and groups of small municipalities) as well as data on disabilities with a low prevalence (such as Alzheimer's disease); and
- to extend the definition of disability to include individuals whose disability was due solely to the presence of a psychiatric condition.

4. Disability defined

"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" (2)

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".(3)

Individuals aged 15 and older 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 considered disabled. 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, 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 three categories indicates a disability.

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.

⁽²⁾ International Classification of Impairments, Disabilities, and Handicaps, World Health Organization, 1980 - page 143.

⁽³⁾ Special Study No. 5, Measuring Disability, O.E.C.D., 1982.

5. Survey design

The target population of the Health and Activity Limitation Survey (HALS) consisted of all persons with a physical, sensory or psychological disability who were living in Canada at the time of the 1986 Census.

This definition includes residents of the Northwest Territories and the Yukon, persons living on Indian reserves, and permanent residents of most collective dwellings and health-care institutions. Penal institutions and correctional facilities were excluded for operational reasons.

HALS is comprised of two surveys - the household survey, which was conducted immediately following the 1986 Census of Population and the institutions survey, which was conducted in the spring of 1987.

5.1 The Household Survey

The household survey (4) took place in two stages. The first stage consisted of Question 20 about activity limitations and disabilities included on the Census long form, which was asked of every fifth household, including collective dwellings such as boarding houses. The second stage was the completion of the HALS household questionnaire.

The purpose of this question was to identify, prior to the survey, a large part of the potential disabled population, in order to focus survey resources on the target group as much as possible.

Identification of eligible respondents for the household component of HALS was an integral part of the 1986 Census field operation. As part of their responsibilities, 23,530 Census Representatives were trained to review the completed Census questionnaires and to create a list of individuals (for selected age groups) who had responded positively to the disability question on the Census form. Two major strata were formed - Indian reserves and all other areas. All Indian reserves were included in the survey and a sample of the remaining areas was selected. Approximately 112,000 individuals in total were selected for the "Yes" sample.

Prior to the conduct of the 1986 Census, a small field test was conducted to determine if all disabled persons, as defined by the screening questions used in the CHDS, would identify themselves by answering "Yes" to the 1986 Census disability question. The results of this test indicated that many persons with a mild disability, as well as some of the elderly, would not answer positively to the Census question. For that reason, it was decided to select from the

⁽⁴⁾ A more detailed description of the sample design for the household survey is available from the Disability Database Program, Statistics Canada, Ottawa, K1A 0T6 (613) 951-0025.

1986 Census data, a sample of individuals who responded negatively to the disability question. This became the "No" sample.

Approximately 72,500 individuals were selected and an interview was conducted with each selected person. If a positive response was obtained to one or more of the HALS screening questions, then the entire questionnaire was completed. Of those individuals contacted, 5% converted from a "No" to a "Yes"; that is, 3,500 additional persons became part of the sample of disabled persons.

The HALS sample was chosen in such a way as to generate estimates for characteristics of disabled persons in up to 200 subprovincial areas throughout Canada. In addition, estimates were assured at the provincial level for native persons living on reserves.

5.2 The Institutions Survey

The 1986 Census of Population provided the list of institutions in Canada which was used for the first stage of selection for the institutions survey. From this list, five types of institutions were chosen for inclusion in HALS. They 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.

Penal institutions and correctional facilities were excluded from the survey, although it was recognized that this would result in some under-coverage of the disabled population.

The selected types of institutions were grouped into three strata - small (having thirty permanent residents or less), medium and large (having 200 residents or more for most provinces). (5) The definition of large varies from province to province. A sample of institutions was selected based on type and size.

Within each selected institution, a sample of residents was selected, based on a listing 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.

The sample is representative in terms of the sizes and categories of institutions and allows for estimates regarding the characteristics of disabled residents at the provincial or territorial level. For the purposes of the survey, 1,100 institutions were selected and the sample of residents within these selected institutions was 18,100.

⁽⁵⁾ A more detailed description of the sample design for the institutions survey is available from the Disability Database Program, Statistics Canada, Ottawa, K1A 0T6 (613) 951-0025.

6. Data collection methodology

6.1 The Household Survey

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Data collection for the household survey took place in the summer of 1986 immediately following the completion of the field work for the 1986 Census. Approximately 1,200 Census Representatives were retained to conduct the interviews and they received additional training on the survey content and procedures. For the part of the sample made up of persons who had indicated they had limitations in response to Question 20 on the Census long form (i.e. the "Yes" sample), in most cases the data were collected by means of personal interviews. For the "No" sample, telephone interviews were usually conducted.

For children, the interview was to be done with a parent or other adult. For adults, the interview was to be done with the selected respondent. However, in some situations, the interview was conducted with another member of the household; for example, when the respondent's physical or psychological state prevented him or her from participating in the survey. Approximately 12% of the interviews with adults were done this way. The response rate for the household survey was 90%, with only 3% of the selected sample refusing to participate in the survey.

6.2 The Institutions Survey

The data collection operations for the institutions survey were carried out in March and April 1987. Only personal interviews were acceptable for the purposes of this survey. Although the interviewers were instructed to try to obtain an interview with the subject in the case of adult residents, this was possible in only 42% of the cases, owing in large part to the severity of the condition of many residents. All the other interviews were done with the help of the institutional staff or next-of-kin. The response rate for the institutions survey was 97%.

7. Content

The HALS database is comprised of data from the HALS questionnaires, as well as data from the 1986 Census of Population.

7.1 HALS Data

There were six questionnaires used for HALS - four for the household survey and two for the institutions survey.

The content of the questionnaires was defined through extensive consultation with public officials involved with the delivery of programs for disabled persons as well as individuals in the private sector involved in associations of and for disabled persons.

The content of Form 02 is the most complete representation of the data needs as articulated during the consultations. Form 04 is a reduced version of Form 02 and represents those data which were appropriate to the geographic location of the individuals. Where possible the questions are identical to those on the Form 02.

The two remaining household survey questionnaires are for children age 14 and younger. Form 03 is for areas covered by Adult Form 02, and Form 05 is for the remainder of the household survey as covered by Adult Form 04. The content of Form 03 is the most complete representation of data needs for disabled children.

The two questionnaires for the institutions survey (Forms 06 and 07) are similar in content to Forms 02 and 03 but reduced in scope to reflect the institutional environment.

7.2 1986 Census of Population Data

Because the HALS household sample was drawn from the respondents to the disability question on the 1986 Census of Population, it was possible to perform a computer link, and select data from the 1986 Census of Population database.

The selected data from the Census database include:

- person-level variables such as ethnic origin, marital status, education, language spoken at home;
- · household-level variables such as owned/rented, type of dwelling; and
- · family-level variables such as income, number of family members.

There were no additional Census data available for the institutions survey respondents because persons were selected for inclusion in the survey from lists of current residents provided by the institution rather than from the Census data base. Basic demographic information was collected as part of the institutions survey.

8. Data processing

8.1 Data Capture

Data capture for both the household and institutions surveys was done at the Statistics Canada Regional Offices. The data were then transferred to Ottawa for further processing. All completed questionnaires and related forms were shipped to Ottawa.

Note: Names and addresses were not captured. The computer records contain a sequential number which can be linked manually to the questionnaires.

8.2 Edit and Imputation

All HALS records were subjected to computer edits to ensure the validity and consistency of the responses. Missing or erroneous data were identified as "unknown", or were imputed based on other information contained on the record.

8.3 Linkage to 1986 Census files

The household component of the HALS database contains selected 1986 Census of Population variables for each selected person in the sample. These selected variables include family data as well as information about the dwelling within which the selected individual resides.

There were no additional Census data available for the institutions survey respondents because persons were selected for inclusion in the survey from lists of current residents provided by the institution rather than from the Census data base. Basic demographic information was collected as part of the institutions survey.

9. Sampling and non-sampling error

Statistics from the HALS institution database are estimated based on a sample survey of a portion of the institution population (approximately 1 out of every 5 institutions and 2 out of every 25 permanent residents). As a result, the statistics are subject to two types of error: sampling and non-sampling errors.

9.1 Sampling Error

The estimates that can be derived from this survey are based on a sample of individuals. Somewhat different estimates might be obtained if a complete census had been taken using the same questionnaire, interviewers, supervisors, processing methods, etc. as those actually used. The difference between the estimates obtained from the sample and those resulting from a complete count taken under similar conditions is called the sampling error of the estimates.

Since it is an unavoidable fact that estimates from a sample survey are subject to sampling error, sound statistical practice calls for researchers to provide users with some indication of the magnitude of this sampling error. This section of the documentation outlines the measures of sampling error which Statistics Canada commonly uses and which it urges users producing estimates from this microdata file to use also.

The basis for measuring the potential size of sampling errors is the standard error of the estimates derived from survey results.

However, because of the large variety of estimates that can be produced from a survey such as this, the standard error of an estimate is usually expressed relative to the estimate to which it pertains. This resulting measure, known as the coefficient of variation of an estimate, is obtained by dividing the standard error of the estimate by the estimate itself and is expressed as a percentage of the estimate.

For example, suppose that, based upon the survey results, one estimates that 15% of persons aged 55 and over are unable to leave the residence because of a condition or health problem and that this estimate is found to have a standard error of .003. Then the coefficient of variation of the estimate is calculated as

Before discussing how these measures can be obtained it is useful to describe the two main types of point estimates of population characteristics which can be generated from the microdata files for the Health and Activity Limitation Survey.

(1) Qualitative Estimates

Qualitative estimates are estimates of the number, proportion or percentage of the surveyed population possessing certain characteristics or falling into some defined category. The number of persons aged 55 and over who are unable to leave the residence because of a condition or health problem or the proportion of Ontario's institutionalized population which had completed more than 10 years of secondary school are examples of such estimates.

In this context, an estimate of the number of persons possessing a certain characteristic is referred to as an estimate of an aggregate.

(2) Quantitative Estimates

Quantitative estimates are estimates of totals or of means, medians and other measures of central tendency based upon some or all of the members of the surveyed population. They also specifically involve estimates of the form \hat{X}/\hat{Y} where \hat{X} is an estimate of the surveyed population total and \hat{Y} is an estimate of the number of persons in the surveyed population contributing to that total.

An example of a quantitative estimate based upon all members in the surveyed population is the mean age in 1987 of disabled Canadians residing in institutions. Similarly, the mean annual out-of-pocket expenses of disabled females aged 15-64 residing in institutions is an example of a quantitative estimate since it's numerator is an estimate of the total expense for all disabled females aged 15-64 in the surveyed population and its denominator is an estimate of the number of disabled females aged 15-64 in the surveyed population.

Where to Obtain Coefficients of Variation for Qualitative Estimates

In order to supply coefficients of variation which would be applicable to a wide variety of qualitative estimates produced from these microdata tapes and which could be readily accessed by the user, a set of "look up" tables, referred to as Sampling Variability Tables, has been produced and included in Appendix H.

There is one set of tables for Canada and every province. In each set, the coefficient of variation is given for the disabled population only. But, one should note that the disabled population is almost equivalent to the total population in institutions. It should be noted that all coefficients of variation in these tables are approximate and therefore, unofficial.

These coefficients of variation are derived using the variance formula for stratified random sampling and incorporating a factor which reflects the multi-stage, clustered nature of the sample design. This factor, known as the design effect, has been determined by first calculating design effects for a wide range of characteristics and then choosing, from among these, a conservative value which will not give a false impression of high precision. Estimates of actual

variance for specific variables may be obtained from Statistics Canada on a cost-recovery basis. As noted in Section 10, use of actual variance estimates allows users to release otherwise unreleaseable estimates, i.e. estimates with coefficients of variation in the "restricted" range.

The following rules should enable the user to determine the approximate coefficients of variation from the Sampling Variability Tables for estimates of the number or proportion of the surveyed population possessing a certain characteristic and for ratios and differences between estimates.

Rule 1: Estimates of Numbers or Proportions Possessing a Characteristic (Aggregates)

On the Sampling Variability Table for the appropriate geographic area, locate the value nearest to the estimate produced. If the estimate is a number, look under the heading TOTAL; if the nearest estimate is a proportion, look under the heading PROP (percentage proportion). The corresponding number in the CV column represents the approximate coefficient of variation.

Rule 2: Estimates of Differences Between Aggregates or Percentages

The standard error of a difference between two estimates is approximately equal to the square root of the sum of squares of each standard error considered separately. That is, the standard error of a difference $\hat{d} = \hat{X}_1 - \hat{X}_2$ is:

$$\vec{d} = \sqrt{(\hat{X}_1 \text{ CV}_1)^2 + (\hat{X}_2 \text{ CV}_2)^2}$$

where \hat{X}_1 is estimate 1, \hat{X}_2 is estimate 2, and CV₁ and CV₂ are the coefficients of variation of \hat{X}_1 and \hat{X}_2 respectively. The coefficient of variation of \hat{d} is given by \mathcal{T} \hat{d}/\hat{d} . This formula is accurate for the difference between separate and uncorrelated characteristics but is only approximate otherwise.

Rule 3: Estimates of Ratios

In the case where the numerator is a subset of the denominator, the ratio should be converted to a percentage and then the coefficient of variation can be found directly in the table. This would apply, for example, to the case where the denominator is the number of disabled males and the numerator is the number of disabled males who had a university certificate or diploma.

In the case where the numerator is not a subset of the denominator, the standard error of the ratio of the two estimates is approximately equal to the square root of the sum of squares of each standard error considered separately. That is, the standard error of a ratio $\hat{R} = \hat{X}_1/\hat{X}_2$ is

$$\sigma_{R} = \sqrt{(\hat{X}_1 \text{ CV}_1)^2 + (\hat{X}_2 \text{ CV}_2)^2}$$

where \hat{X}_1 is the numerator, \hat{X}_2 the denominator, and CV_1 and CV_2 are the coefficients of variation of \hat{X}_1 and \hat{X}_2 respectively.

The coefficient of variation of \hat{R} is given by $\square \hat{R}/\hat{R}$. The formula will tend to overstate the error if \hat{X}_1 and \hat{X}_2 are positively correlated and understate the error if \hat{X}_1 and \hat{X}_2 are negatively correlated.

Rule 4: Estimates of Differences of Ratios

In this case, Rules 2 and 3 are combined. The cv's for the two ratios are first determined using Rule 3, and then the CV of their difference is found using Rule 2. The following 'real life' example is included to assist users in applying the foregoing rules.

Example

Suppose a user studying the disabled population residing in institutions in Manitoba estimates from the institutions microdata file that 2,200 male seniors were disabled in 1987 in the institutions.

How does the user determine the coefficient of variation of this estimate?

- (1) Refer to the Manitoba Sampling Variability Tables.
- (2) The estimated aggregate, 2,200, does not appear on the TOTAL column, so it is necessary to use the figure closest to it, namely 2,000.
- (3) The coefficient of variation corresponding to an estimated aggregate of this size is 6.27%.

How to Obtain Coefficients of Variation for Quantitative Estimates

For quantitative estimates, special tables would have to be produced to determine their sampling error. Since the variables for the Health and Activity Limitation Survey in institutions are primarily qualitative in nature, this has not been done.

As a general rule, however, the coefficient of variation of a quantitative total will be larger than the coefficient of variation of the corresponding qualitative estimate (i.e., the estimate of the number of persons contributing to the quantitative estimates). If the corresponding qualitative estimate is not releasable, the quantitative estimate will not be either.

Coefficients of variation of such estimates can be derived as required for a specific estimate using a technique known as pseudo replication. This involves randomly dividing the records on the microdata files into subgroups (or replicates) and determining the variation in the estimate from replicate to replicate. Users wishing to derive coefficients of variation for quantitative estimates may contact Statistics Canada for advice on the allocation of records to appropriate replicates and the formulae to be used in these calculations.

Confidence Limits

Although coefficients of variation are widely used, a more intuitively meaningful measure of sampling error is the confidence interval of an estimate. A confidence interval constitutes a statement on the level of confidence that the true value for the population lies within a specified range of values. For example a 95% confidence interval can be described as follows:

If sampling of the population is repeated indefinitely, each sample leading to a new confidence interval for an estimate, then in 95% of the samples the interval will cover the true population value.

Using the standard error of an estimate, confidence intervals for estimates may be obtained under the assumption that under repeated sampling of the population, the various estimates obtained for a population characteristic are normally distributed about the true population value. Under this assumption, the chances are about 68 out of 100 that the difference between a sample estimate and the true population value would be less than one standard error, about 95 out of 100 that the difference would be less than two standard errors, and about 99 out of 100 that the differences would be less than three standard errors. These different degrees of confidence are referred to as the confidence levels.

Confidence intervals for an estimate, \hat{X} , are generally expressed as two numbers, one below the estimate and one above the estimate, as $(\hat{X}-k, \hat{X}+k)$ where k is determined depending upon the level of confidence desired and the sampling error of the estimate.

Confidence intervals for an estimate can be calculated directly from the Sampling Variability Tables by first determining from the appropriate table the coefficient of variation of the estimate X, and then using the following formula to convert to a confidence interval CI:

$$CIx = \{ \stackrel{\bigstar}{X} - t \cdot CV(\stackrel{\bigstar}{x}) \cdot x, \stackrel{\bigstar}{X} + t \cdot CV(\stackrel{\bigstar}{x}) \cdot \stackrel{\bigstar}{x} \}$$

where $CV(\hat{x})$ is the determined coefficient of variation of \hat{X} and

t = 1 if a 68% confidence interval is desired

t = 2 if a 95% confidence interval is desired

t = 3 if a 99% confidence interval is desired

For instance, if we go back to the previous example, the 95% confidence interval for the estimate of 2,200 disabled male seniors in Manitoba would be given by

$$\{2,200 - 2 \times .0627 \times 2,200, 2,200 + 2 \times .0627 \times 2,200\} = \{1,924, 2,476\}$$

9.2 Non-Sampling Errors

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 1986 Census of Population has made it possible to greatly reduce this type of error. Comparison with other lists of institutions have shown a low level of error.

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 in institutions, the response rate (95%) compares very favorably 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 institutional characteristics obtained by the census.

Finally, it should be noted that because of confidentiality considerations, four institutions were dropped from the sample and weights of some others were randomly adjusted. This may produce some distortions in particuliar analyses of the data but these modifications were made to minimize such distortions.

10. Publication and release guidelines

It is important for users to become familiar with the contents of this section before publishing or otherwise releasing any estimates derived from the microdata tapes of the Health and Activity Limitation Survey in institutions.

This section of the documentation outlines the guidelines to be adhered to by users publishing or otherwise releasing any data derived from the survey microdata tapes. With the aid of these guidelines, users of microdata should be able to produce the same figures as those produced by Statistics Canada and, at the same time, will be able to develop currently unpublished figures in a manner consistent with these established guidelines. This section consists basically of four sub-sections - the rounding guidelines, the sample weighting guidelines, the sampling variability guidelines and guidelines for statistical analysis.

Rounding Guidelines

In order that estimates for publication or other release derived from these microdata tapes will correspond to those produced by Statistics Canada, users are urged to adhere to the following guidelines regarding the rounding of such estimates.

- a) Estimates in the main body of a statistical table are to be rounded to the nearest hundred units using the normal rounding technique. In normal rounding, if the first or only digit to be dropped is 1 to 4, the last digit to be retained is not changed. If the first or only digit to be dropped is 5 to 9, the last digit to be retained is raised by one. For example, in normal rounding to the nearest 100, if the last two digits are between 00 and 49, they are changed to 00 and the preceding digit (the hundreds digit) is left unchanged. If the last digits are between 50 and 99 they are changed to 00 and the preceding digit is incremented by 1.
- b) Marginal sub-totals and totals in statistical tables are to be derived from their corresponding unrounded components and then are to be rounded themselves to the nearest 100 units using normal rounding.
- c) Averages, proportions, rates and percentages are to be computed from unrounded components (i.e. numerators and/or denominators) and then are to be rounded themselves to one decimal using normal rounding. In normal rounding to a single digit, if the final or only digit to be dropped is 0 to 4, the last digit to be retained is not changed. If the first or only digit to be dropped is 5 to 9, the last digit to be retained is increased by 1.
- d) Sums and differences of aggregates or ratios are to be derived from their corresponding unrounded components and then are to be rounded themselves to the nearest 100 units or the nearest one decimal using normal rounding.

- e) In instances where, due to technical or other limitations, a rounding technique other than normal rounding is used resulting in estimates to be published or otherwise released which differ from corresponding estimates published by Statistics Canada, users are urged to note the reason for such differences in the publication or release document(s).
- f) Under no circumstances are unrounded estimates to be published or otherwise released by users. Unrounded estimates imply greater precision than actually exists.

Sample Weighting Guidelines for Tabulation

The sample design used for the Health and Activity Limitation Survey was not self-weighting. When producing simple estimates, including the production of ordinary statistical tables, users must apply the sampling weights placed on the individual microdata tape records. Otherwise, the estimates derived from the microdata tapes cannot be considered to be representative of the survey population.

Sampling variability guidelines for the Health and Activity Limitation Survey in institutions

Before releasing and/or publishing any estimate from these microdata tapes, users should determine its coefficient of variation and follow the guidelines below.

Types of Estimate	cv (in %)	Guidelines
1. Unqualified	0.0 - 16.5	Estimates can be considered for general unrestricted release. Requires no special notation.
2. Qualified	16.6 - 25.0	Estimates can be considered for general unrestricted release but should be accompanied by a warning cautioning subsequent users of the high sampling variability associated with the estimates. Such estimates should be identified by the letter Q (or some other similar fashion).
3. Confidential	25.1 - 33.3	Estimates can be considered for general unrestricted release only when sampling variabilities are obtained using an exact variance calculation procedure. Unless such variances are obtained, such estimates should be deleted and replaced by dashes () in statistical tables.
4. Not for release	33.4 or greater	Estimates cannot be released in any form under any circumstances. In statistical tables, such estimates should be deleted and replaced by dashes ().

Note: These sampling variability guidelines should be applied to rounded estimates.

Guidelines for Statistical Analysis

HALS in institutions is based upon a complex design, with stratification and multiple stages of selection, and unequal probabilities of selection of respondents. Using data from such complex surveys presents problems to analysts because the survey design and the selection probabilities affect the estimation and variance calculation procedures that should be used.

While many analysis procedures found in statistical packages allow weights to be used, the meaning or definition of the weight in these procedures differ from that which is appropriate in a sample survey framework, with the result that while in many cases the estimates produced by the packages are correct, the variances that are calculated are almost meaningless.

For many analysis techniques (for example linear regression, logistic regression, estimation of rates and proportions and analysis of variance), a method exists which can make the variances calculated by the standard packages more meaningful. If the weights on the data are rescaled so that the average weight is one (1), then the variances produced by the standard packages will be more reasonable; they still will not take into account the stratification and clustering of the sample's design, but they will take into account the unequal probabilities of selection. The rescaling can be accomplished by dividing each weight by the overall average weight before the analysis is conducted.

APPENDIX A

Questionnaire and Q-Card

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Health and Activity Limitation Survey for Institutions (Adults)

Form 06

"Authority Stati Statutes of Cana 1970-71-72, Cha

(Adults)	1970-71-72, Cha
INTRODUCTION	Final Sta
Statistics Canada is conducting a special survey to provide information on those Canadians, who, for health-related reasons, are limited in the kind and amount of activity they can perform on a day-to-day basis. The information gathered in the Health and Activity Limitation Survey will help identify the problems these Canadians face when dealing with activities of daily living and such matters as special aids and assistance and transportation. Participation in this survey is voluntary.	Fully Completed Partial Refusal No Contact Other
CONFIDENTIAL WHEN COMPLETED	
PROV FED No. EA No. VN Instit. No. Form Person No. 0 6	Non-proxy Proxy
Name of institution	Telephone numb
Address Street and No.	
City, town, village, municipality Province or territory	Postal (
Comments	

Interviewer's Signature

Date

SECTION A - ACTIVITIES OF DAILY LIVING

section contains questions about your ability to do certain activities, even when using a special aid. Please report only problems which are expected to last six months or more. These questions were designed for a broad range of tions and some may not seem to apply to your situation.

	_	_		
	Yes column			
Do you have any trouble walking 400 yards/ 400 metres without resting (about three city blocks)?		la.	Are you completely unable to do this? Yes, completely unable 5 1	
Yes, has trouble	30	1	· · · · · · · · · · · · · · · · · · ·	Go to 2
No 4 🗆 — Go to 2]	No, able 6 🗆 🕽	
Do you have any trouble walking up and down a flight of stairs (about 12 steps)?	1 -	2a.		
Yes, has trouble	7 🗆		Yes, completely unable 1	Go to 3
No 8 □			No, able	
Do you have any trouble carrying an object of 10 pounds for 30 feet/5 kilograms for 10 metres example: carrying a bag of groceries)?		3a.	Are you completely unable to do this? Yes, completely unable 5	Contact
Yes, has trouble	3 🔲	1	No, able 6 🗆 🕽	Go to 4
No 4 □				
Do you have any trouble moving from one room to another?		4a.	Are you completely unable to do this? Yes, completely unable 1	
řes, has trouble	7	1	}	Go to 5
Vo 8 □			No, able 2 5	
Do you have any trouble standing for long periods of time, that is, more than 20 minutes?	 	5a.	Are you completely unable to do this?	
Remember, I am asking about problems expected to last 6 months or more.			Yes, completely unable 5 No, able 6	Go to 6
(es, has trouble	3 🗆		No, able	
√o 4 □ Go to 6				
Vhen standing, do you have any trouble ending down and picking up an object from the loor (example: a shoe)?		6a.	Are you completely unable to do this? Yes, completely unable 1)	
es, has trouble	7 🗆	İ	No, able 2 🗆 }	Go to 7
io 8 🔲 Go to 7			,	
o you have any trouble dressing and ndressing yourself?	_	7a.	Are you completely unable to do this?	
'es, has trouble	3 🗖		Yes, completely unable 5 🗆	Go to 8
ĭo 4 □ Go to 8			No, able 6 🗆)	
to you have any trouble getting in and out of ed?	_	8a.	Are you completely unable to do this?	
'es, has trouble	7 🗆		Yes, completely unable 1	Go to 9
io 8 🗆			No, able 2 🗍)	
o you have any trouble cutting your own enails?		9a.	Are you completely unable to do this?	
es, has trouble	3 🗆		Yes, completely unable 5	Go to 10
o 4 □			No, able 6 🔲)	
o you have any trouble using your fingers to casp or handle?		10a.	Are you completely unable to do this?	
es, has trouble	7 🗆		Yes, completely unable 1 🗆	Go to 11
o 8 🗆 Go to 11			No, able 2 🗍)	
o you have any trouble reaching in any rection (example: above your head)?		lla.	Are you completely unable to do this?	
es, has trouble	3 🗀		Yes, completely unable 5 U	Go to 12
0 4 □ → Go to 12			No, able 6 🗍)	

			Τ	
		Yes column		
12.	Do you have any trouble cutting your own food?		12a.	Are you completely unable to do this?
	Yes, has trouble	7 🗆		Yes, completely unable 1 🗆 🕽
	No 8 □ → Go to 13			No, able2 🗆 🕽
13.	Do you have any trouble hearing what is said in		13a	Are you completely unable to do this?
10.	a normal conversation with one other person?		100.	Yes, completely unable5 🗆)
ŀ	Yes, has trouble	³ 🗆		No, able 6
	No 4 □ → Go to 14		<u></u>	
14.	Do you have any trouble hearing what is said in a group conversation with at least three other people?		14a.	Are you completely unable to do this? Yes, completely unable 1 \(\sime\)
	Yes, has trouble	7 🗆		No, able2 🗆 🕽
	No 8 🗆			
15.	Are you able to understand what is being said over a normal telephone, with a hearing aid if used?			
	Yes3 🗆)			
	No 4 🗆 } Go to 16			
	Don't know 5 🔲)			
16.	Do you have any trouble seeing clearly the print		16a.	Are you completely unable to do this?
	on this page, with glasses if normally worn?			Yes, completely unable3 🗆
	Yes, has trouble	¹ 🗀		No, able4 🗆 ∫
	No 2 □> Go to 17			
17.	Do you have any trouble seeing clearly the face of someone from 12 feet/4 metres (example: across a room), with glasses if normally worn?		17a.	Are you completely unable to do this? Yes, completely unable 7
	Yes, has trouble	5 □		No, able8 🗆 }
	No 6 □ → Go to 18		!	,
18.	INTERVIEWER CHECK ITEM:	_ -	18a.	Have you been diagnosed by an eye spec being legally blind?
	If "Yes" is checked in question 16 or 17,			Yes3 □ → G
	Then	10		No4 □ → G
	Otherwise 2 🗆			Don't know/Not sure 5 □
•			18b.	Are you able to recognize a hand in fron eyes and count the number of finger shown?
				Yes 6 No 7
			18c.	This question is about aids for the impaired. Do you now use
				glasses/spectacles/ contact lenses? Yes1 \(\simeg\) No .
				hand-held magnifiers? Yes 3 🔲 No .
				a white cane? Yes 5 No .
				other aid(s) for the visually impaired? Yes 7 No.
				(specify)

ŀ

	· · · · · · · · · · · · · · · · · · ·							
		Yes column						
	have any trouble speaking and nderstood?			ow well are nen speakin		to make you	irself und	ierstood
-	s trouble Go to 20	10		Co	mpletely	Partially	Not at all	Don't know
.NO			you	nbers of r own illy?	01 🗀	02 🔲	03 🗀	04 🗆
			ii) you	r freinds?	05	06 🗆	07	08 🔲
				dence/	aa CT	10 🗇		12 🗆
				itution? er people?	13 🗀	14 🗆	15	16 🗆
127700	VIEWER CHECK ITEM: If any "Ye	ar in ab a ala	L					
Then	Go to 20a	s is enecked	ı ın tne sı	creening co	idiiii tot qu	lestions I to		
Otherv								
20a.	What is the main condition or health stated?	n problem w	hich give	es you troui	ole perform	ing any of th	ne activit	ies just
;	Specify							
20b.	Which of these selections is the best d	escription o	f your cor	dition?				
	INTERVIEWER: Show "Q" card.	Enter appr	opriate n	umber				
20c.	s there any other condition or health	problem wh	ich cause	s you troub	le performi	ng any of the	ese activi	ties?
•	7es3 □	No	4 🗆 -			21		
20d.	What is this condition or health probl	em?						
5	Specify							
20e.	Which of these selections is the best d	escription of	this cond	dition?				
	INTERVIEWER: Show "Q" card.	Enter appro	priate n	umber				
	e of a long-term physical condition or limited in the kind or amount of activ			t is, one th	at is expect	ed to last 6 :	months or	more,
(i) in t	he residence/institution?							
Yes	, is limited 3	No	••••	4 🗆				
(ii) out	side the residence/institution such as	travel recr	eation, o	r leisure?				}
Yes	, is limited5 🗖	No	· · · · · · · · · · · · · · · · · · ·	6 🗀				İ
21a. I	NTERVIEWER CHECK ITEM:							
	any "Yes" is checked in 21(i) or 21(ii							
Т	Then 1 Go to 21b							
	Otherwise ² Go to 22							
21b. V	hat is the main condition or health p	roblem whi	ch limits	you in your	activity?	· , , , , , ,		
s	pecify							
21c. V	hich of these selections is the best de	scription of	your con	dition?				
	INTERVIEWER: Show "Q" card.	Enter appro	priate nu	ımber				
	there any other long-term physical cat you can do?	endition or	health pr	oblem which	ch limits th	e kind or am	ount of a	ctivity
	Yes			3 🗆 ——	- Go	to 21e		
	No			4 🗆	→ Go	to 22		

SECTION B - SPECIAL AIDS AND ASSISTANCE

Th	s section is about assistance which you may require in or	der to	do certain activities
В1	Do you use any of the following special aids?	B7	Is this because of your condition or health pr
	INTERVIEWER: Read list. Mark all that apply.		Yes 4□ No 5□ → Go
	A hearing aid 01 0	B8	Are you helped by someone else working or the residence/institution including a volunte
	Other aid(s) for the hearing impaired		Yes 6 No 7
	Orthopedic footwear 04	20	
	Artificial foot or leg 05	B9	Are you helped with your personal finances to accounting service outside the reinstitution?
	Cane (other than a white cane) 06		Yes ¹□ No 2□ Don't know
	Crutches 07	B 10	
	Manual wheelchair 08 🔲		residence/institution, for example, spouse child or some other relative, or a friend?
	Electric wheelchair 09		Yes 3□ No 4□ Don't know
	Walker 10	B11	Because of your condition, do you get h
	Other mobility aid(s) 11		personal care, such as washing, grooming, and feeding yourself?
	(specify)		Yes 1□ No 2□
	Any aids for hands or arms such as prosthesis or arm brace		Tes -
	(specify)	B12	On average, how many days a week do you with this personal care?
	None of the above 13 [
B2	Who usually does your shopping for clothing or other necessities?	B13	On average, how many hours of help per da
	INTERVIEWER: Read list. Mark only one.		get with this personal care?
	yourself alone 1 Go to B6	B14	How do you move about within the residence
	yourself and someone else 2	D14	INTERVIEWER: Read list. Mark only on
	someone else 3 🗀		By yourself
В3	Is this because of your condition or health problem?		Sometimes by yourself and
	Yes 4 ☐ No 5 ☐ — Go to B6		sometimes by yourself and sometimes with the help of another person2_
B4	Are you helped by someone working or living in the		Only with the help of another person \dots 3 \square
	residence/institution including a volunteer? Yes 6 \(\text{No} \text{No} 7		Not at all, because of your condition or health problem
	165 °C 140 °C		GO TO SECTION C
B5	Are you helped by someone from outside the residence/institution, for example, spouse, parent, child or some other relative, or a friend?		
	Yes 8☐ No 9☐		
В6	Who usually looks after your personal finances, such as banking or paying bills?		
	INTERVIEWER: Read list. Mark only one.		
	yourself alone 1 Go to B11		
	yourself and someone else 2		
	someone else 3 🗌		

21e. What is this long-term condition or health problem?					
Specify					
21f. Which of these selections is the best description of this condition?					
INTERVIEWER: Show "Q" card. Enter appropriate number					
From time to time, everyone has trouble remembering the name of a familiar person, or learning something new	, or				
they experience moments of confusion. However, do you have any ongoing problems with your ability to remem or learn?	ber				
Yes 6 🔲 ——— Go to 22a					
No 7 □ Go to 23					
22a. Are these problems caused by a condition that you had at birth?					
Yes8					
No9					
22b. What condition causes these problems?					
and the condition causes treet problems.					
INTERVIEWER: Show "Q" card. Mark all that apply.					
Effects of a stroke					
Disease or illness affecting the brain such as a brain tumor, meningitis					
Injury to the brain					
• •					
Alzheimer's disease diagnosed by a physician					
Condition related to aging					
Developmentally delayed (mental retardation) 6					
Learning disability					
Other					
(specify)					
Don't know 9					
Because of a long-term emotional, psychological, nervous or mental health condition or problem, are you limited the kind or amount of activity you can do:	l in				
(i) in the residence/institution?					
Yes, is limited 1 No					
(ii) outside the residence/institution such as, travel, sports, or leisure?					
Yes, is limited 3 No					
23a. INTERVIEWER CHECK ITEM:					
If any "Yes" is checked in 23(i) or 23(ii)					
Then 1 Go to 23b Otherwise 2 Go to 24 23b What is the main condition or health problem which limits you in your setimits?					
					23b. What is the main condition or health problem which limits you in your activity? Specify
What is your date of birth? 25. Were you living in this residence/institution on					
Census Day, June 3rd 1986?					
Day Month Year Yes 3 No 4					
INTERVIEWER CHECK ITEM:					
Sex: Male 1 Female 2					
GO TO SECTION B					

SECTION C - TRANSPORTATION

	is section is about the means of transportation which you pointments or any other local trips under 50 miles (80km)		r local travel. This includes trips shopping
C1	Are you unable to leave the residence/ institution to take short trips because of your condition or health problem? Yes 1 No 2 Go to C3		Is local public transportation, for example rapid transit, subway, or metro, available area? Yes 08 No
C2	Some communities have a special bus or van service	-{	Don't know 10
CZ	for people who have difficulty using regular transportation. When using this special service, people can call ahead and ask to be picked up at the		How often do you use the local public traservice?
	residence/institution. If this special service were available in the area, would you be able to take short	Almost every day through	INTERVIEWER: Read list. Mark only o
	distance trips?		Almost every day throughout the year
	Yes		Almost every day throughout some part of the year
СЗ	Because of your condition, do you require an attendant or a companion to accompany you on short trips?		Frequently Occasionally
	<u> </u>		•
		<u> </u>	Seldom/never
C4	Do you have any trouble as a passenger using a private motor vehicle because of your condition?	C11	Do you have any trouble using the l transportation service, because of your co
	Yes 4☐ No 5☐ Don't know 6☐		Yes 6□ No 7□ → Go
C5	Some communities have special bus or van service for people who have difficulty using regular local public transportation. When using this special service, people can call ahead and ask to be picked up at their residence/institution. Do you need such a service?	C12	What kind of trouble do you have?
			INTERVIEWER: Do not read list. Mark apply.
			Getting to the stop
	Yes 7 No		Waiting at the stop
	Don't know 9 ☐ }		Getting on and off
C6	Is this special service available in the area?		Insufficient space to sit or stand in the
	Yes 1 No		vehicle
			Standing in the vehicle while it is moving
C7	How often do you use this service?	1	Obtaining information about timetables, schedules and routes
	Almost every day throughout the year Almost every day throughout		Public transportation staff unsupportive
			Other
			Don't know
	some part of the year ² Go to C9	C13	Is there a taxi service in this area?
	Frequently		Yes 1 No
	Seldom/never5	C14	How often do you use this taxi service?
C8	Why don't you use this special bus or van service		INTERVIEWER: Read list. Mark only o
ſ	more often?		Almost every day throughout the year
	INTERVIEWER: Do not read list. Mark all that apply.		Almost every day throughout some part of the year
	Service not needed more often		Frequently
	Not eligible for this service2		•
	On the waiting list for service3		Occasionally
	Service too expensive4		Seldom/never
	Impractical scheduling for your needs5	C15	Is this because of your condition or health
	Area covered by service not large enough 6		Yes ¹□ No 2□
	GO TO SE	CTIO	N D

SECTION D - ACCOMMODATION - EDUCATION AND EXPENSES

Because of your condition, do you need any special features to enter or leave this residence/institution or more about inside it? Yes 1 No 2 To Go to D3						
What special features do you need to enter or leave this residence/institution or move about inside it?						
INTERVIEWER: Read list. Mark all that apply.						
Access ramps 01 Accessible parking 06						
Widened doorways or hallways						
A street level entrance 03 Hand rails (including bathroom) 08 Page 1 A Street level entrance 03 Cartal Street level entrance 08 Carta Street level entrance 08 Cartal Street level entrance 08 Cartal Street level entrance						
Doors that open automatically						
An elevator of the device						
a. What is the highest grade of secondary or elementary school you ever attended?						
Highest grade or year (1 to 13) of secondary or elementary school or attended kindergarten only Go to D						
b. How many years of education have you ever completed at university?						
89 None 90 Less than 1 year (of completed courses)						
Number of completed years at university						
c. How many years of schooling have you ever completed at an institution other than a university, secondary (high) or elementary school? Include years of schooling at community colleges, institutes of technology, CEGEPS (general and professional), private trade schools or private business colleges, diploma schools of nursing, etc.						
89 None 90 Less than 1 year (of completed courses)						
Number of completed years						
What degrees, certificates or diplomas have you ever obtained?						
INTERVIEWER: Read list. Mark all that apply.						
None 01 Bachelor's degree(s) (e.g. BA. B.Sc., B.A. Sc., LL.B.) 06						
Gecondary (high) school graduation University certificate or diploma above bachelor level 07 Certificate						
Trades certificate or diploma Master's degree (e.g. MA, M.Sc., M.Ed.)						
Other non-university certificate or diploma Degree in medicine, dentistry, veterinary medicine or optometry (MD, DDS, DMD, DVM OD)						
(obtained at a community college, CEGEP, institute of technology, etc.) O4 Earned doctorate (e.g. Ph.D., D.Sc., D.Ed.)						
University certificate or diploma below bachelor level						
People sometimes have extra Out-of-pocket expenses as a result of their condition or health problem. In 1986 di you have any extra expenses for your drugs, medical services, education, transportation, accomodation special aid or clothing, personal services, etc. for which you were not completely reimbursed by any insurance or government program?						
Yes ¹□ No ²□ → END OF INTERVIEW (Complete front cover)						
For each of the following items please give your best estimate of these extra Out-of-pocket expenses due to your condition, for the year 1986.						
Amount						
³rescription and non-prescription drugs None ¹□ or \$						
Purchase and maintenance of special clothing, aids, medical supplies and equipment for home, work, travel, etc. None 2 or \$						
Health and medical services not covered by any insurance plan, for example additional hospital or physician fees						
Pransportation, for example, travel to and from treatment, therapy of other medical or rehabilitation services, or extra expenses due the need for more costly transportation						
)ther (specify) None 5 or \$00						
IND OF INTERVIEW (Complete front cover)						

"Q" CARD ADULT QUESTIONNAIRE

SECTION A - SCREEN

Best description of your condition:

MY CONDITION ...

- 01 existed AT BIRTH
- 02 is a **DISEASE** or illness

OR

MY CONDITION WAS CAUSED BY ...

- 03 a DISEASE or illness (including its treatment)
- 04 my WORK ENVIRONMENT
- 05 a STROKE
- 06 a VIOLENT ACT (crime)
- 07 AGING
- 08 an ACCIDENT AT WORK
- 09 a MOTOR VEHICLE ACCIDENT
- 10 a WAR INJURY
- 11 other ACCIDENT
- 12 other cause
- 13 don't know

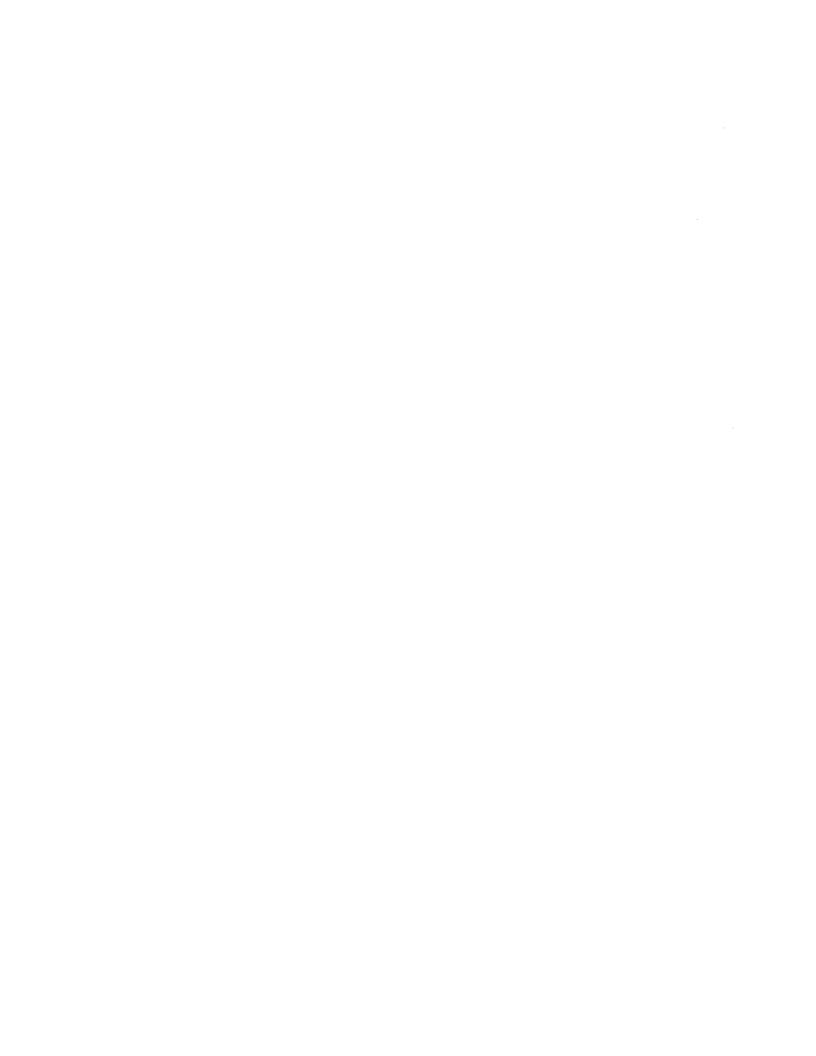
Question 22b

22b What condition causes you these problems?

- 1. Effects of a stroke
- 2. Disease or illness affecting the brain, such as brain tumor, meningitis
- 3. Injury to the brain
- 4. Alzheimer's disease diagnosed by a physician
- 5. Condition related to aging
- 6. Developmentally delayed (mental retardation)
- 7. Learning disability
- 8. Other (specify)
- 9. Don't know

APPENDIX B

Weighting Procedures for the Health and Activity Limitation Survey



Weighting Procedures for the Health and Activity Limitation Survey

1. Background

In any probability sample survey, every individual can be considered as representative of a certain number of people in the sampled population.

The institutions microdata file created for the Health and Activity Limitation Survey (HALS) contains a record for each disabled individual who participated in the survey. Each record contains the demographic characteristics of the individual and information on the nature and severity of his/her disability and the barriers that he/she faces in everyday living.

Instead of reproducing the records according to the number of individuals that each record represents in the population, a weight is attached to each record. This weight represents the number of times the records should be reproduced in order to establish population estimates. For example, if one wanted to estimate the number of disabled persons in Canada, one would sum the weights for those records on the file that represent disabled individuals. The sum of the weights equals the estimate of the number of disabled persons.

2. Value of the weight

The value of the weight depends on many factors. For a simple random sample, where each individual has the same probability of being chosen, each individual has the same weight. For example, if the size of the population is 1000 and the random sample taken from it is 50, each individual record would have a weight of 20, (1000/50). In this case, any proportion calculated without using the weights would be the same as the one that would be obtained by using the weights.

However, in practice, most sample designs are much more complex than the simple random sample. Furthermore, different weight adjustments are made to correct the non-response and to insure the representativeness of the sample in relation to certain characteristics. For these reasons, the weights can vary considerably between individuals, and for every analysis based on these samples, the weight must be used.

3. Weight Calculation for HALS in Institutions

The sample design of HALS in institutions is a stratified two-stage sampling. The two stages are the institution and the resident. Institutions were stratified by size (small, medium and large) and by type (orphanage, psychiatric or general hospitals, chronic condition, senior or physical handicap institutions).

The weight of every resident is calculated along the following manner. First, since there was a simple random sample in every institution, each resident was assigned a weight equal to the known sum of total permanent residents in the institution, divided by the number of respondents in the institution. Then, this weight was multiplied by the total number of permanent residents in the stratum, as collected by the Census, divided by the total number of permanent residents in the institution selected.

To obtain more information on the weighting of HALS, consult Théberge, A. (1987) Weighting for the Health and Activity Limitation Survey, Working Document, Statistics Canada.

APPENDIX C

General Guidelines for using the Microdata file

General Guidelines for using the Microdata File

1. Field Names

The fields on the microdata file have been named according to their question number on the questionnaire.

Example 1 - Question 13 in Section A of the questionnaire is "Do you have any trouble hearing what is said in a normal conversation with one other person?". The Field Name for this question on the microdata file is A13. The "A" in the field name represents the Section on the questionnaire; the "13" in the field name represents the question number within the Section.

Example 2 - Question 18b in Section A of the questionnaire is "Are you able to recognize a hand in front of your eyes and count the number of fingers being shown?". The Field Name for this question on the microdata file is A18B. The "A" in the field name represents the Section on the questionnaire; the "18" in the field name represents the question number within the Section; and the B represents the "b" part of the Question 18.

2. Missing Questions

Not all questions on the questionnaire appear in the microdata file. If users are interested in the data from a particular question which does not appear on the file, they should contact the Disability Database Program.

3. Coding Structure in the Microdata File

The coding structure of the microdata file has been standardized across all questions for ease of use.

In addition to standardizing codes, e.g. - making all "Yes" responses equal 1 and "No" responses equal 2, the edit system also assigned numeric values to questions that were not asked because of the skip pattern on the questionnaire (Blank value), and were missed but should have been asked (Not Stated value).

The following provides a description of these codes with examples:

One-digit fields

Value = 9 Description = Not Stated

This code appears if the question should have been answered but was not.

Example: if the response to Question A1 was "Yes" and Question A1A was left blank, the edit system assigned a value of 9 to A1A.

Value = 0 Description = Blank

This code appears if the question should not have been answered because of a skip pattern on the questionnaire.

Example: If the response to Question A1 was "No", then the edit system assigned a value of 0 to Field A1A.

This code also appears if the question should have been answered but was not because the preceding question had been missed.

Example: If Question A1 was missed, the edit system assigned a value of 9 to Field A1 and a value of 0 to Field A1A.

Two-digit fields

Value = 97 Description = Blank

This code appears if the question should not have been answered because of a skip pattern on the questionnaire.

Example: If the response to Question A20C was "No", then the edit system assigned a value of 97 to Field A20E.

This code also appears if the question should have been answered but was not because a preceding question had been missed.

Example: If Question B11 was missed, the edit system assigned a value of 9 to Field B11 and a value of 97 to Field B13.

Value = 99 Description = Not Stated

This code appears if the question should have been answered but was not.

Example: if the response to Question B11 was "Yes" and Question B13 was left blank, the edit system assigned a value of 99 to B13.

Three-digit fields

Codes were standardized in the same manner as for two digit fields. Codes used were 999 for Not Stated and 997 for Blank.

APPENDIX D

Record Layout

	•		

HEALTH AND ACTIVITY LIMITATION SURVEY

ENQUETE SUR LA SANTE ET LES LIMITATIONS D'ACTIVITES

RECORD LAYOUT - CLICHE D'ARTICLES

INSTITUTIONS ADULTS MICRO DATA FILE

VARIABLE NAME NOM DE LA VARIABLE	POSITIONS	SIZE LONGUEUR
ID	0001-0005	5
PROV	0006-0007	2
PROXY	8000-8000	1
A1	0009-0009	1
A1A	0010-0010	1
A2	0011-0011	1
A2A	0012-0012	1
A3	0013-0013	1
A3A	0014-0014	1
A4	0015-0015	1
A4A	0016-0016	1
A 5	0017-0017	1
A5A	0018-0018	1
A 6	0019-0019	1
A6A	0020-0020	1
A7	0021-0021	1
A7A	0022-0022	1
A8	0023-0023	1
A8A	0024-0024	1
A9	0025-0025	1
A9A	0026-0026	1
A10	0027-0027	1
A10A	0028-0028	1
A11	0029-0029	1
A11A	0030-0030	1
A12	0031-0031	1
A12A	0032-0032	1
413	0033-0033	1
A13A	0034-0034	1
114	0035-0035	1
114A	0036-0036	1

HEALTH AND ACTIVITY LIMITATION SURVEY

ENQUETE SUR LA SANTE ET LES LIMITATIONS D'ACTIVITES

RECORD LAYOUT --- CLICHE D'ARTICLES

INSTITUTIONS ADULTS MICRO DATA FILE

VARIABLE NAME NOM DE LA VARIABLE	POSITIONS	SIZE LONGUEUR
A15	0037-0037	1
A16	0038-0038	1
A16A	0039-0039	1
A17	0040-0040	1
A17A	0041-0041	1
A18	0042-0042	1
A18A	0043-0043	1
A18B	0044-0044	1
A18C1	0045-0045	1
A18C2	0046-0046	1
A18C3	0047-0047	1
A18C4	0048-0048	1
A19	0049-0049	1
A19AI	0050-0050	1
A19AII	0051-0051	1
A19AIV	0052-0052	1
A19AV	0053-0053	1
A20	0054-0054	1
A20A1	0055-0056	2
A20A2	0057-0058	2
A20B	0059-0060	2
A20C	0061-0061	1
A20D1	0062-0063	2
A20D2	0064-0065	2
A20E	0066-0067	2
A21I	0068-0068	1
A21II	0069-0069	1
A21A	0070-0070	1
A21B1	0071-0072	2
A21B2	0073-0074	2
A21C	0075-0076	2

HEALTH AND ACTIVITY LIMITATION SURVEY

ENQUETE SUR LA SANTE ET LES LIMITATIONS D'ACTIVITES

RECORD LAYOUT --- CLICHE D'ARTICLES

INSTITUTIONS ADULTS MICRO DATA FILE

VARIABLE NAME NOM DE LA VARIABLE	POSITIONS	SIZE LONGUEUR
A21D	0077-0077	1
A21E1	0078-0079	2
A21E2	0080-0081	2
A21F	0082-0083	2
A22	0084-0084	1
A22A	0085-0085	1
A22B1	0086-0086	1
A22B2	0087-0087	1
A22B3	0088-0088	1
A22B4	0089-0089	1
A22B5	0090-0090	1
A22B6	0091-0091	1
A22B7	0092-0092	1
A22B8	0093-0093	1
A22B9	0094-0094	1
A23I	0095-0095	1
A23II	0096-0096	1
A23A	0097-0097	1
A23B1	0098-0099	2
A23B2	0100-0101	2
A25	0102-0102	1
B1A	0103-0103	1
B1B	0104-0104	1
B1C	0105-0105	1
B1D	0106-0106	1
B1E	0107-0107	1
B1F	0108-0108	1
316	0109-0109	1
32	0110-0110	1
33	0111-0111	1
34	0112-0112	1

HEALTH AND ACTIVITY LIMITATION SURVEY

ENQUETE SUR LA SANTE ET LES LIMITATIONS D'ACTIVITES

RECORD LAYOUT --- CLICHE D'ARTICLES

INSTITUTIONS ADULTS MICRO DATA FILE

VARIABLE NAME NOM DE LA VARIABLE	POSITIONS	SIZE LONGUEUR
B5	0113-0113	1
B6	0114-0114	1
В7	0115-0115	1
B8	0116-0116	1
В9	0117-0117	1
B10	0118-0118	1
B11	0119-0119	1
B14	0120-0120	1
C1	0121-0121	1
C2	0122-0122	1
С3	0123-0123	1
C4	0124-0124	1
C5	0125-0125	1
C6	0126-0126	1
C7	0127-0127	1
C8A	0128-0128	1
C8B	0129-0129	1
C9	0130-0130	1
C10	0131-0131	1
C11	0132-0132	1
C12A	0133-0133	1
C12B	0134-0134	1
C12C	0135-0135	1
C12D	0136-0136	1
C12E	0137-0137	1
C12F	0138-0138	1
C12G	0139-0139	1
C12H	0140-0140	1
C13	0141-0141	1
C14	0142-0142	1
:15	0143-0143	1

HEALTH AND ACTIVITY LIMITATION SURVEY

ENQUETE SUR LA SANTE ET LES LIMITATIONS D'ACTIVITES

RECORD LAYOUT - CLICHE D'ARTICLES

INSTITUTIONS ADULTS MICRO DATA FILE

VARIABLE NAME NOM DE LA VARIABLE	POSITIONS	SIZE Longueur
D1	0144-0144	1
D2A	0145-0145	1
D2B	0146-0146	1
D2C	0147-0147	1
D2D	0148-0148	1
D2E	0149-0149	1
D2F	0150-0150	1
D2G	0151-0151	1
D2H	0152-0152	1
D2I	0153-0153	1
D5	0154-0154	1
D6A1	0155-0155	1
D6B1	0156-0156	1
D6C1	0157-0157	1
D6D1	0158-0158	1
D6E1	0159-0159	1
SEX	0160-0160	1
AGEGRP1	0161-0162	2
AGEGRP2	0163-0164	2
М Т	0165-0173	9
INSTCODE	0174-0174	1
HLE	0175-0175	1
MOBILITY	0176-0176	1
AGILITY	0177-0177	1
SEEING	0178-0178	1
HEARING	0179÷0179	1
SPEAKING	9180-0180	1
OTHER	0181-0181	1
JNKNOWN	0182-0182	1
SEVERITY	0183-0183	1

APPENDIX E

Index to Variables

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The Data Dictionary and the Index to Variables were produced using the Data Dictionary Management System (DDMS) developed by the Policy, Communications and Information Branch, Health and Welfare Canada.

ADULTS INSTITUTION MICRODATA FILE

INDEX TO VARIABLES

<u>P</u>.

VARIABLE	VARIABLE DESCRIPTION		
ID	RECORD IDENTIFICATION NUMBER		
PROV	PROVINCE		
PROXY	INFORMATION SOURCE		
A	SECTION A - ACTIVITIES OF DAILY LIVING		
A1	TROUBLE WALKING WITHOUT RESTING, 400 YDS/METRES		
A1A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A2	TROUBLE WALKING UP AND DOWN A FLIGHT OF STAIRS		
A2A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A 3	TROUBLE CARRYING 10 LBS FOR 30 FT/5 KG FOR 10 M		
A3A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A4	TROUBLE MOVING FROM ONE ROOM TO ANOTHER		
A4A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A5	TROUBLE STANDING FOR MORE THAN 20 MINUTES		
A5A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A6	TROUBLE BENDING DOWN AND PICKING UP AN OBJECT		
A6A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A7	TROUBLE DRESSING AND UNDRESSING YOURSELF		
A7A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A8	TROUBLE GETTING IN AND OUT OF BED		
A8A	ARE YOU COMPLETELY UNABLE TO DO THIS		
A9	TROUBLE CUTTING YOUR OWN TOENAILS		

A9A	ARE YOU COMPLETELY UNABLE TO DO THIS	4
A10	TROUBLE USING FINGERS TO GRASP OR HANDLE	4
A10A	ARE YOU COMPLETELY UNABLE TO DO THIS	4
A11	TROUBLE REACHING IN ANY DIRECTION	5
AllA	ARE YOU COMPLETELY UNABLE TO DO THIS	5
A12	TROUBLE CUTTING YOUR OWN FOOD	5
A12A	ARE YOU COMPLETELY UNABLE TO DO THIS	5
A13	PROBLEM HEARING - CONVERSATION WITH 1 PERSON	5
A13A	ARE YOU COMPLETELY UNABLE TO DO THIS	5
A14	TROUBLE HEARING - CONVERSATION WITH 3 PEOPLE	6
A14A	ARE YOU COMPLETELY UNABLE TO DO THIS	6
A15	TROUBLE HEARING OVER A NORMAL TELEPHONE	6
A16	TROUBLE READING THE QUESTIONNAIRE	6
A16A	ARE YOU COMPLETELY UNABLE TO DO THIS	6
A17	TROUBLE SEEING FACES FROM 12 FT/4 METRES	6
A17A	ARE YOU COMPLETELY UNABLE TO DO THIS	7
A18	TROUBLE WITH VISION - QUESTIONS 16 AND 17	7
A18A	HAVE YOU BEEN DIAGNOSED AS LEGALLY BLIND	7
A18B	RECOGNIZE A HAND AND COUNT FINGERS	7
A18C	WHAT AIDS FOR THE VISUALLY IMPAIRED USED	7
A18C1	GLASSES/SPECTACLES/CONTACT LENSES	7
A18C2	HAND-HELD MAGNIFIERS	8
A18C3	A WHITE CANE	8
A18C4	OTHER AID(S) FOR THE VISUALLY IMPAIRED	8
A19	TROUBLE SPEAKING AND BEING UNDERSTOOD	8
A19A	HOW WELL ARE YOU UNDERSTOOD WHEN SPEAKING WITH	8
A19AI	MEMBERS OF YOUR FAMILY	8

A19AII	YOUR FRIENDS	č
A19AIV	STAFF IN RESIDENCE/INSTITUTION	5
A19AV	OTHER PEOPLE	č
A20	ANY LIMITATIONS - QUESTIONS 1 TO 19	ĉ
A20A1	MAIN CONDITION OR HEALTH PROBLEM (1)	1(
A20A2	MAIN CONDITION OR HEALTH PROBLEM (2)	12
A20B	WHICH OF THESE BEST DESCRIBES YOUR CONDITION	13
A20C	ANY OTHER CONDITION LIMITING ACTIVITY	13
A20D1	OTHER CONDITION OR HEALTH PROBLEM (1)	14
A20D2	OTHER CONDITION OR HEALTH PROBLEM (2)	15
A20E	WHICH OF THESE BEST DESCRIBES YOUR CONDITION	16
A21	ARE YOU LIMITED IN KIND OR AMOUNT OF ACTIVITY	16
A21I	IN RESIDENCE/INSTITUTION	16
A21II	IN OTHER ACTIVITIES OUTSIDE RESIDENCE	16
A21A	LIMITED IN ACTIVITIES - QUESTIONS 211 AND 2111	16
A21B1	MAIN CONDITION OR HEALTH PROBLEM (1)	17
A21B2	MAIN CONDITION OR HEALTH PROBLEM (2)	19
A21C	WHICH OF THESE BEST DESCRIBES YOUR CONDITION	20
A21D	ANY OTHER LIMITING LONG TERM CONDITION	20
A21E1	MAIN CONDITION OR HEALTH PROBLEM (1)	21
A21E2	MAIN CONDITION OR HEALTH PROBLEM (2)	22
A21F	WHICH OF THESE BEST DESCRIBES YOUR CONDITION	23
A22	ONGOING PROBLEMS REMEMBERING OR LEARNING	23
A22A	CAUSED BY CONDITION AT BIRTH	23
A22B	WHAT CONDITION CAUSES THESE PROBLEMS	23
A22B1	EFFECTS OF A STROKE	23
A22B2	DISEASE OR ILLNESS AFFECTING THE BRAIN	23

A22B3	INJURY TO THE BRAIN	24
A22B4	ALZHEIMER'S DISEASE	24
A22B5	CONDITION RELATED TO AGING	24
A22B6	DEVELOPMENTALLY DELAYED	24
A22B7	LEARNING DISABILITY	24
A22B8	OTHER	24
A22B9	DON'T KNOW	25
A23	ARE YOU LIMITED IN KIND OR AMOUNT OF ACTIVITY	25
A23I	IN RESIDENCE/INSTITUTION	25
A23II	IN OTHER ACTIVITIES OUTSIDE RESIDENCE	25
A23A	LIMITED IN ACTIVITIES - QUESTIONS 231 AND 2311	25
A23B1	MAIN CONDITION OR HEALTH PROBLEM (1)	26
A23B2	MAIN CONDITION OR HEALTH PROBLEM (2)	27
A25	LIVING IN RESIDENCE/INSTITUTION JUNE 3, 1986	28
В	SECTION B - SPECIAL AIDS AND ASSISTANCE	28
B1	WHAT AIDS DO YOU USE	28
B1A	A HEARING AID	28
B1B	OTHER AID(S) FOR THE HEARING IMPAIRED	28
віс	OTHER MOBILITY AIDS	28
B1D	WALKING AIDS	28
B1E	WHEELCHAIR	29
B1F	OTHER AIDS FOR HANDS OR ARMS	29
B1G	NONE OF THE ABOVE	29
B2	WHO SHOPS FOR GROCERIES OR OTHER NECESSITIES	29
В3	IS THIS BECAUSE OF YOUR CONDITION	29
B4	ARE YOU HELPED BY SOMEONE WORKING IN INSTITUTION	29
B5	ARE YOU HELPED BY YOUR FAMILY OR FRIEND	30

В6	WHO USUALLY LOOKS AFTER PERSONAL FINANCES	30
В7	IS THIS BECAUSE OF YOUR CONDITION	30
B8	ARE YOU HELPED BY SOMEONE WORKING AT INSTITUTION	30
B9	ARE YOU HELPED BY A LEGAL SERVICE	30
B10	ARE YOU HELPED BY YOUR FAMILY OR FRIEND	31
B11	DO YOU GET HELP WITH PERSONAL CARE	31
B14	MOVING WITHIN THE RESIDENCE	31
С	SECTION C - TRANSPORTATION	31
C1	PREVENTED FROM LEAVING RESIDENCE DUE TO CONDITION	31
C2	WOULD YOU USE SPECIAL TRANSPORTATION IF AVAILABLE	31
С3	DO YOU REQUIRE ATTENDANT ON SHORT TRIPS	32
C4	DO YOU HAVE TROUBLE AS A PASSENGER	32
C5	DO YOU NEED SPECIAL TRANSPORTATION SERVICE	32
C6	IS SPECIAL SERVICE AVAILABLE IN YOUR AREA	32
C7	HOW OFTEN DO YOU USE THIS SERVICE	32
C8	WHY DON'T YOU USE SERVICE MORE OFTEN	32
C8A	SERVICE NOT NEEDED MORE OFTEN	33
C8B	OTHER	33
C9	LOCAL PUBLIC TRANSPORT AVAILABLE IN YOUR AREA	33
C10	HOW OFTEN USE PUBLIC TRANSPORTATION SERVICES	33
C11	DO YOU HAVE ANY TROUBLE USING PUBLIC TRANSPORT.	33
C12	KIND OF TROUBLE USING PUBLIC TRANSPORTATION	33
C12A	GETTING TO THE STOP	34
C12B	WAITING AT THE STOP	34
C12C	GETTING ON AND OFF	34
C12D	INSUFFICIENT SPACE TO SIT OR STAND IN VEHICLE	34
C12E	STANDING IN VEHICLE WHILE IT IS MOVING	34

C12F	OBTAINING INFORMATION ABOUT TIMETABLES, ROUTES	34
C12G	OTHER	35
C12H	DON'T KNOW	35
C13	IS THERE A TAXI SERVICE IN YOUR AREA	35
C14	HOW OFTEN DO YOU USE THIS TAXI SERVICE	35
C15	IS THIS BECAUSE OF YOUR CONDITION	35
D	SECTION D - ACCOMMODATION - EDUCATION AND EXPENSES	35
D1	DO YOU NEED SPECIAL FEATURES TO ENTER / LEAVE RES.	36
D2	SPECIAL FEATURES NEEDED TO ENTER OR LEAVE RES.	36
D2A	ACCESS RAMPS	36
D2B	WIDENED DOORWAYS OR HALLWAYS	36
D2C	A STREET LEVEL ENTRANCE	36
D2D	DOORS THAT OPEN AUTOMATICALLY	36
D2E	AN ELEVATOR OR LIFT DEVICE	36
D2F	ACCESSIBLE PARKING	37
D2G	SOME OTHER ARCHITECTURAL FEATURES	37
D2H	HAND RAILS	37
D2I	SOME OTHER FEATURE	37
D5	DO YOU HAVE OUT-OF-POCKET EXPENSES NOT REIMBURSED	37
D6	OUT-OF-POCKET EXPENSES NOT REIMBURSED	37
D6A1	PRESCRIPTION AND NON-PRESCRIPTION DRUGS	37
D6B1	PURCHASE AND MAINTAINANCE OF SPECIAL AIDS	38
D6C1	HEALTH AND MEDICAL SERVICES NOT COVERED	38
D6D1	TRANSPORTATION	38
D6E1	OTHER	38
DERIVED	DERIVED VARIABLES	38
SEX	SEX	38

	AGEGRP1	AGE GROUP (1)	39
	AGEGRP2	AGE GROUP (2)	39
:	WT	VARIABLE FOR WEIGHTED ESTIMATES	4 C
	INSTCODE	INSTITUTIONAL TYPE	40
	HLE	HIGHEST LEVEL OF EDUCATION	40
	MOBILITY	FLAG TO INDICATE MOBILITY DISABILITY	41
	AGILITY	FLAG TO INDICATE AGILITY DISABILITY	41
	SEEING	FLAG TO INDICATE SEEING DISABILITY	41
	HEARING	FLAG TO INDICATE HEARING DISABILITY	41
	SPEAKING	FLAG TO INDICATE SPEAKING DISABILITY	42
	OTHER	FLAG TO INDICATE OTHER NATURE OF DISABILITY	42
	UNKNOWN	FLAG TO INDICATE NATURE OF DISABILITY UNKNOWN	42
	SEVERITY	SEVERITY INDEX	43

APPENDIX F

Data Dictionary

DETAILED DESCRIPTION OF VARIABLES

RECORD IDENTIFICATION NUMBER ID

PROV	PROVINCE	
	CONTENT	CODE
	NEWFOUNDLAND	10
	PRINCE EDWARD ISLAND	11
	NOVA SCOTIA	12
	NEW BRUNSWICK	13
	QUEBEC	24
	ONTARIO	35
	MANITOBA	46
	SASKATCHEWAN	47
	ALBERTA	48
	BRITISH COLUMBIA	59
PROXY	INFORMATION SOURCE	
	CONTENT	CODE
	NON-PROXY	1
	PROXY	1 2 9
	NOT STATED	9
A	SECTION A - ACTIVITIES	OF DAILY LIVI

A1 TROUBLE WALKING WITHOUT RESTING, 400 YDS/METRES

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A1A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

DETAILED DESCRIPTION OF VARIABLES

A2 TROUBLE WALKING UP AND DOWN A FLIGHT OF STAIRS

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A2A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A3 TROUBLE CARRYING 10 LBS FOR 30 FT/5 KG FOR 10 M

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A3A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A4 TROUBLE MOVING FROM ONE ROOM TO ANOTHER

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A4A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A5 TROUBLE STANDING FOR MORE THAN 20 MINUTES

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A5A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A6 TROUBLE BENDING DOWN AND PICKING UP AN OBJECT

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A6A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A7 TROUBLE DRESSING AND UNDRESSING YOURSELF

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A7A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

2

9

A8	TROUBLE GETTING IN AND OUT OF BED
	CONTENT CODE YES 1 NO 2 NOT STATED 9
A8A	ARE YOU COMPLETELY UNABLE TO DO THIS
	CONTENT CODE BLANK 0 YES 1 NO 2 NOT STATED 9
A9	TROUBLE CUTTING YOUR OWN TOENAILS
	CONTENT CODE YES 1 NO 2 NOT STATED 9
A9A	ARE YOU COMPLETELY UNABLE TO DO THIS
	CONTENT CODE BLANK 0 YES 1 NO 2 NOT STATED 9
A10	TROUBLE USING FINGERS TO GRASP OR HANDLE
	CONTENTCODEYES1NO2NOT STATED9
A10A	ARE YOU COMPLETELY UNABLE TO DO THIS
	CONTENT CODE BLANK 0 YES 1

NO

NOT STATED

REACHING IN	ANY	DIRECTION
2	EACHING IN	EACHING IN ANY

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A11A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A12 TROUBLE CUTTING YOUR OWN FOOD

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A12A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A13 PROBLEM HEARING - CONVERSATION WITH 1 PERSON

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A13A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	<u>CODE</u>
BLANK	0
YES	1
NO	2
NOT STATED	9

A14 TROUBLE HEARING - CONVERSATION WITH 3 PEOPLE

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A14A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A15 TROUBLE HEARING OVER A NORMAL TELEPHONE

CONTENT	<u>CODE</u>
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

A16 TROUBLE READING THE QUESTIONNAIRE

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A16A ARE YOU COMPLETELY UNABLE TO DO THIS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A17 TROUBLE SEEING FACES FROM 12 FT/4 METRES

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A17A ARE YOU COMPLETELY UNABI	E ?	TO	DO	THIS
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CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A18 TROUBLE WITH VISION - QUESTIONS 16 AND 17

CONTENT	<u>CODE</u>
YES	1
NO	2

A18A HAVE YOU BEEN DIAGNOSED AS LEGALLY BLIND

CONTENT	CODE
BLANK	0
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

A18B RECOGNIZE A HAND AND COUNT FINGERS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A18C WHAT AIDS FOR THE VISUALLY IMPAIRED USED

A18C1 GLASSES/SPECTACLES/CONTACT LENSES

CONTENT	CODE
BLANK	
YES	1
NO	2
NOT STATED	9

A18C2 HAND-HELD MAGNIFIERS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A18C3 A WHITE CANE

CONTENT	<u>CODE</u>
BLANK	0
YES	1
NO	2
NOT STATED	9

A18C4 OTHER AID(S) FOR THE VISUALLY IMPAIRED

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A19 TROUBLE SPEAKING AND BEING UNDERSTOOD

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A19A HOW WELL ARE YOU UNDERSTOOD WHEN SPEAKING WITH

A19AI MEMBERS OF YOUR FAMILY

CONTENT	CODE
BLANK	0
COMPLETELY	1
PARTIALLY	2
NOT AT ALL	3
DON'T KNOW	4
NOT STATED	9

CONTENT	CODE
BLANK	0
COMPLETELY	1
PARTIALLY	2
NOT AT ALL	3
DON'T KNOW	4
NOT STATED	9

A19AIV STAFF IN RESIDENCE/INSTITUTION

CONTENT	CODE
BLANK	0
COMPLETELY	1
PARTIALLY	2
NOT AT ALL	3
DON'T KNOW	4
NOT STATED	9

A19AV OTHER PEOPLE

CONTENT	CODE
BLANK	0
PARTIALLY	2
NOT AT ALL	3
DON'T KNOW	4
NOT STATED	9

A20 ANY LIMITATIONS - QUESTIONS 1 TO 19

CONTENT	CODE
YES	1
NO	2

A20A1 MAIN CONDITION OR HEALTH PROBLEM (1)

CONTENT	CODE
-	01
ICD9 = VA00	02
ICD9 = 797.0	
ICD9 = 331	03
ICD9 = VP15-19	04
ICD9 = 290	05
ICD9 = 436.0	06
ICD9 = 780	07
ICD9 = 298	08
ICD9 = VH01-06	09
ICD9 = 429	10
ICD9 = 332	11
ICD9 = VA01-06	12
ICD9 = 319.0	13
ICD9 = 250	14
ICD9 = 310	15
ICD9 = 440	16
ICD9 = 389	17
ICD9 = 428	18
ICD9 = VS02-06	19
ICD9 = 295	20
ICD9 = 340.0	21
ICD9 = 369.0	22
ICD9 = 437	23
ICD9 = VU01-06	24
ICD9 = 799	25
ICD9 = ALL OTHER ICD9	26
OTHER INSTITUTIONS	96
BLANK	97
NOT STATED	99
HOI DINIED	, , ,

COMMENTS

The underlying health problem or condition has been coded using the International Classification of Diseases, 9th Revision. The 2-digit codes appear on the datafile wich is maintained at Statistics Canada. The data presented in Field A2OA1 represent the 25 most prevalent underlying health conditions or problems reported by individuals in special care institutions only. Records representing individuals in the "Other" institutions have been coded to 96.

01: Arthritis - no site specified

02 : Senility without mention of psychosis

03 : Other cerebral degenerations

04 : Paralysis

05 : Senile and presentle organic psychotic conditions

06 : Acute but ill-defined cerebrovascular disease

07 : General symptoms

08 : Other nonorganic psychoses

09 : Fractures / breaks - lower body (bones only)

10 : Ill-defined descriptions and complications of heart

disease

- 11 : Parkinson's disease
- 12 : Arthritis lower body
- 13 : Unspecified mental retardation
- 14 : Diabetes mellitus
- 15 : Specific nonpsychotic mental disorders following organic brain damage
- 16: Atherosclerosis
- 17 : Deafness
- 18 : Heart failure
- 19 : Weakness lower body
- 20 : Schizophrenic psychoses
- 21 : Multiple sclerosis
- 22 : Blindness and low vision
- 23 : Other and ill-defined cerebrovascular disease
- 24 : Other unspecified impairments lower body
- 25 : Other ill-defined and unknown causes of morbidity and mortality
- 26 : All other conditions or health problems

A20A2 MAIN CONDITION OR HEALTH PROBLEM (2)

CONTENT	CODE
MENTAL DISORDERS	01
MENTAL RETARDATION	02
NERVOUS SYSTEM / SENSORY	03
CIRCULATORY SYSTEM	04
RESPIRATORY SYSTEM	05
MUSCULOSKELETAL SYSTEM	06
ARTHRITIS	07
CONGENITAL ANOMALIES	80
INJURY AND POISONING	09
OTHER	10
BLANK	97
NOT STATED	99

COMMENTS

This variable represents broad categories of the ICD-9 coding. (See Field A20A1). Responses by individuals in all institutions are included in this variable.

CODE	1CD-9
01	290.0-315.9, V25.2-V40.9, V41.4, V41.7, V57.3, V60.2-V71.9
02	317.0-319.0
03	320.0-389.9,V41.0-V41.3,V41.8,V42.5, V43.0,V43.1,V45.2,V53.1,V53.2, VP00-VP19,VT00-VT19
04	390.0-459.9,V42.2,V43.2-V43.4,V45.0, V53.3
05	460.0-519.9
06	710.0-738.9,V42.4,V42.8,V43.6,V43.7, V45.4,V49.1,V49.2,V53.8, VB13-VF19,VM00-VN19,VU00-VU19
07	VA00-VA19
08	740.0-759.9,VJ00-VK19
09	801.0-998.9,VG00-VH19,VL00-VL15
10	001.0-289.9,520.0-709.9,760.0-799.9, V22.2,V41.6,V42.0,V42.3,V42.9,V43.8, V44.0-V44.3,V44.5,V44.6,V45.1,V45.3, V45.8,V47.2-V47.4,V47.9,V50.1-V53.0, V53.6,V56.0,V56.8,V58.0-V58.2,V58.5, VR00-VS19

A20B WHICH OF THESE BEST DESCRIBES YOUR CONDITION

CONTENT	CODE
EXISTED AT BIRTH	01
IS A DISEASE OR ILLNESS	02
CAUSED BY A DISEASE OR ILLNESS	03
CAUSED BY WORK OR ACCIDENT	04
CAUSED BY A STROKE	05
CAUSED BY AGING	06
CAUSED BY OTHER CAUSE	07
DON'T KNOW	08
BLANK	97
NOT STATED	99

A20C ANY OTHER CONDITION LIMITING ACTIVITY

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A20D1 OTHER CONDITION OR HEALTH PROBLEM (1)

CONTENT	CODE
ICD9 = VA00	01
ICD9 = 250	02
ICD9 = 389	03
ICD9 = 780	04
ICD9 = 429	05
ICD9 = 401	06
ICD9 = VH01-06	07
ICD9 = 797.0	08
ICD9 = 366	09
ICD9 = 298	10
ICD9 = 290	11
ICD9 = 428	12
ICD9 = VA01-06	13
ICD9 = ALL OTHER ICD9	14
OTHER INSTITUTIONS	96
BLANK	97
NOT STATED	99

COMMENTS

The underlying health problem or condition has been coded using the International Classification of Diseases, 9th Revision. The 2-digit codes appear on the datafile wich is maintained at Statistics Canada. The data presented in Field A20D1 represent the 13 most prevalent underlying health conditions or problems reported by individuals in special care institutions only. Records representing individuals in the "Other" institutions have been coded to 96.

- 01 : Arthritis no site specified
- 02 : Diabetes mellitus
- 03 : Deafness
- 04 : General symptoms
- 05 : Ill-defined descriptions and complications of heart disease
- 06 : Essential hypertension
- 07 : Fractures / breaks lower body (bones only)
- 08 : Semility without mention of psychosis
- 09 : Cataract
- 10 : Other nonorganic psychoses
- 11 : Senile and presenile organic psychotic conditions
- 12 : Heart failure
- 13 : Arthritis lower body
- 14 : All other conditions or health problems

A20D2 OTHER CONDITION OR HEALTH PROBLEM (2)

CONTENT	CODE
MENTAL DISORDERS	01
MENTAL RETARDATION	02
NERVOUS SYSTEM / SENSORY	03
CIRCULATORY SYSTEM	04
RESPIRATORY SYSTEM	05
MUSCULOSKELETAL SYSTEM	06
ARTHRITIS	07
CONGENITAL ANOMALIES	08
INJURY AND POISONING	09
OTHER	10
BLANK	97
NOT STATED	99

COMMENTS

This variable represents broad categories of the ICD-9 coding. (See Field A20D1). Responses by individuals in all institutions are included in this variable.

CODE	ICD-9
01	290.0-315.9,V25.2-V40.9,V41.4,V41.7, V57.3,V60.2-V71.9
02	317.0-319.0
03	320.0-389.9,V41.0-V41.3,V41.8,V42.5, V43.0,V43.1,V45.2,V53.1,V53.2, VP00-VP19,VT00-VT19
04	390.0-459.9,V42.2,V43.2-V43.4,V45.0, V53.3
05	460.0-519.9
06	710.0-738.9,v42.4,v42.8,v43.6,v43.7, v45.4,v49.1,v49.2,v53.8, vB13-vF19,vM00-vN19,vu00-vu19
07	VA00-VA19
80	740.0-759.9,VJ00-VK19
09	801.0-998.9,VG00-VH19,VL00-VL15
10	001.0-289.9,520.0-709.9,760.0-799.9, V22.2,V41.6,V42.0,V42.3,V42.9,V43.8, V44.0-V44.3,V44.5,V44.6,V45.1,V45.3, V45.8,V47.2-V47.4,V47.9,V50.1-V53.0, V53.6,V56.0,V56.8,V58.0-V58.2,V58.5, VR00-VS19

A20E WHICH OF THESE BEST DESCRIBES YOUR CONDITION

CONTENT	CODE
EXISTED AT BIRTH	01
IS A DISEASE OR ILLNESS	02
CAUSED BY A DISEASE OR ILLNESS	03
CAUSED BY WORK OR ACCIDENT	04
CAUSED BY A STROKE	05
CAUSED BY AGING	06
CAUSED BY OTHER CAUSE	07
DON'T KNOW	08
BLANK	97
NOT STATED	99

A21 ARE YOU LIMITED IN KIND OR AMOUNT OF ACTIVITY

A21I IN RESIDENCE/INSTITUTION

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A21II IN OTHER ACTIVITIES OUTSIDE RESIDENCE

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A21A LIMITED IN ACTIVITIES - QUESTIONS 211 AND 2111

CONTENT	CODE
YES	1
NO	2

A21B1 MAIN CONDITION OR HEALTH PROBLEM (1)

CONTENT	CODE
ICD9 = VA00	01
ICD9 = 331	02
ICD9 = VP15-19	03
ICD9 = 797.0	04
ICD9 = 290	05
ICD9 = 780	06
ICD9 = 436.0	07
ICD9 = 298	80
ICD9 = 429	09
ICD9 = 332	10
ICD9 = VH01-06	11
ICD9 = 319.0	12
ICD9 = VA01-06	13
ICD9 = 310	14
ICD9 = 428	15
ICD9 = 440	16
ICD9 = 340.0	17
ICD9 = 250	18
ICD9 = 295	19
ICD9 = 369.0	20
ICD9 = VS02-06	21
ICD9 = 799	22
ICD9 = 437	23
ICD9 = 389	24
ICD9 = ALL OTHER ICD9	25
OTHER INSTITUTIONS	96
BLANK	97
NOT STATED	99

COMMENTS

The underlying health problem or condition has been coded using the International Classification of Diseases, 9th Revision. The 2-digit codes appear on the datafile wich is maintained at Statistics Canada. The data presented in Field A21B1 represent the 24 most prevalent underlying health conditions or problems reported by individuals in special care institutions only. Records representing individuals in the "Other" institutions have been coded to 96.

01 : Arthritis - no site specified

02 : Other cerebral degenerations

03 : Paralysis

04 : Senility without mention of psychosis

05 : Senile and presentle organic psychotic conditions

06 : General symptoms

07 : Acute but ill-defined cerebrovascular disease

08 : Other nonorganic psychoses

09 : Ill-defined descriptions and complications of heart disease

10 : Parkinson's disease

- 11 : Fractures / breaks lower body (bones only)
- 12 : Unspecified mental retardation
- 13 : Arthritis lower body
- 14 : Specific nonpsychotic mental disorders following organic brain damage
- 15 : Heart failure
- 16: Atherosclerosis
- 17: Multiple sclerosis
- 18 : Diabetes mellitus
- 19 : Schizophrenic psychoses
- 20 : Blindness and low vision
- 21 : Weakness lower body
- 22: Other ill-defined and unknown causes of morbidity and
- 23 : Other and ill-defined cerebrovascular disease
- 24 : Deafness
- 25 : All other health conditions or problems

A21B2 MAIN CONDITION OR HEALTH PROBLEM (2)

CONTENT	<u>CODE</u>
MENTAL DISORDERS	01
MENTAL RETARDATION	02
NERVOUS SYSTEM / SENSORY	03
CIRCULATORY SYSTEM	04
RESPIRATORY SYSTEM	05
MUSCULOSKELETAL SYSTEM	06
ARTHRITIS	07
CONGENITAL ANOMALIES	80
INJURY AND POISONING	09
OTHER	10
BLANK	97
NOT STATED	99

COMMENTS

This variable represents broad categories of the ICD-9 coding. (See Field A21B1). Responses by individuals in all institutions are included in this variable.

CODE	ICD-9
01	290.0-315.9, v25.2-v40.9, v41.4, v41.7, v57.3, v60.2-v71.9
02	317.0-319.0
03	320.0-389.9, V41.0-V41.3, V41.8, V42.5, V43.0, V43.1, V45.2, V53.1, V53.2, VP00-VP19, VT00-VT19
04	390.0-459.9,V42.2,V43.2-V43.4,V45.0, V53.3
05	460.0-519.9
06	710.0-738.9,V42.4,V42.8,V43.6,V43.7, V45.4,V49.1,V49.2,V53.8, VB13-VF19,VM00-VN19,VU00-VU19
07	VA00-VA19
08	740.0-759.9,VJ00-VK19
09	801.0-998.9,VG00-VH19,VL00-VL15
10	001.0-289.9,520.0-709.9,760.0-799.9, V22.2,V41.6,V42.0,V42.3,V42.9,V43.8, V44.0-V44.3,V44.5,V44.6,V45.1,V45.3, V45.8,V47.2-V47.4,V47.9,V50.1-V53.0, V53.6,V56.0,V56.8,V58.0-V58.2,V58.5, VR00-VS19

A21C WHICH OF THESE BEST DESCRIBES YOUR CONDITION

CONTENT	CODE
EXISTED AT BIRTH	01
IS A DISEASE OR ILLNESS	02
CAUSED BY A DISEASE OR ILLNESS	03
CAUSED BY WORK OR ACCIDENT	04
CAUSED BY A STROKE	05
CAUSED BY AGING	06
CAUSED BY OTHER CAUSE	07
DON'T KNOW	80
BLANK	97
NOT STATED	99

A21D ANY OTHER LIMITING LONG TERM CONDITION

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A21E1 MAIN CONDITION OR HEALTH PROBLEM (1)

CONTENT	CODE
ICD9 = VA00	01
ICD9 = 250	02
ICD9 = 389	03
ICD9 = 401	04
ICD9 = 797.0	05
ICD9 = 780	06
ICD9 = ALL OTHER ICD9	07
OTHER INSTITUTIONS	96
BLANK	97
NOT STATED	99

COMMENTS

The underlying health problem or condition has been coded using the International Classification of Diseases, 9th Revision. The 2-digit codes appear on the datafile wich is maintained at Statistics Canada. The data presented in Field A21E1 represent the 6 most prevalent underlying health conditions or problems reported by individuals in special care institutions only. Records representing individuals in the "Other" institutions have been coded to 96.

01 : Arthritis - no site specified

02 : Diabetes mellitus

03 : Deafness

04 : Essential hypertension

05 : Senility without mention of psychosis

06 : General symptoms

07 : All other conditions or health problems

A21E2 MAIN CONDITION OR HEALTH PROBLEM (2)

CONTENT	CODE
MENTAL DISORDERS	01
MENTAL RETARDATION	02
NERVOUS SYSTEM / SENSORY	03
CIRCULATORY SYSTEM	04
RESPIRATORY SYSTEM	05
MUSCULOSKELETAL SYSTEM	06
ARTHRITIS	07
CONGENITAL ANOMALIES	08
INJURY AND POISONING	09
OTHER	10
BLANK	97
NOT STATED	99

COMMENTS

This variable represents broad categories of the ICD-9 coding. (See Field A21E1). Responses by individuals in all institutions are included in this variable.

CODE	ICD-9
01	290.0-315.9,V25.2-V40.9,V41.4,V41.7, V57.3,V60.2-V71.9
02	317.0-319.0
03	320.0-389.9,V41.0-V41.3,V41.8,V42.5, V43.0,V43.1,V45.2,V53.1,V53.2, VP00-VP19,VT00-VT19
04	390.0-459.9,v42.2,v43.2-v43.4,v45.0, v53.3
05	460.0-519.9
06	710.0-738.9, V42.4, V42.8, V43.6, V43.7, V45.4, V49.1, V49.2, V53.8, VB13-VF19, VM00-VN19, VU00-VU19
07	VA00-VA19
08	740.0-759.9,VJ00-VK19
09	801.0-998.9, VG00-VH19, VL00-VL15
10	001.0-289.9,520.0-709.9,760.0-799.9, V22.2,V41.6,V42.0,V42.3,V42.9,V43.8, V44.0-V44.3,V44.5,V44.6,V45.1,V45.3, V45.8,V47.2-V47.4,V47.9,V50.1-V53.0, V53.6,V56.0,V56.8,V58.0-V58.2,V58.5, VR00-VS19

A21F	WHICH OF THESE BEST I	DESCRIBES	YOUR (CONDITION
	CONTENT		CODE	
	EXISTED AT BIRTH		01	
	IS A DISEASE OR ILLNESS		02	
	ONLIGHT BY A DECENCE OF TIEN	mee	0.2	

CAUSED BY A DISEASE OR ILLNESS 03
CAUSED BY WORK OR ACCIDENT 04
CAUSED BY A STROKE 05
CAUSED BY AGING 06
CAUSED BY OTHER CAUSE 07
DON'T KNOW 08
BLANK 97

NOT STATED 99

A22 ONGOING PROBLEMS REMEMBERING OR LEARNING

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A22A CAUSED BY CONDITION AT BIRTH

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

A22B WHAT CONDITION CAUSES THESE PROBLEMS

A22B1 EFFECTS OF A STROKE

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

A22B2 DISEASE OR ILLNESS AFFECTING THE BRAIN

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

INJURY TO THE BRAIN	
CONTENT BLANK YES NOT STATED	CODE 0 1 9
	_
ALZHEIMER'S DISEASE	
CONTENT BLANK YES	CODE 0 1 9
NOT STATED	9
CONDITION RELATED TO AGING	
CONTENT BLANK YES NOT STATED	CODE 0 1 9
DEVELOPMENTALLY DELAYED	
CONTENT BLANK YES	CODE 0 1 9
NOT STATED	9
LEARNING DISABILITY	
LEARNING DISABILITY CONTENT BLANK YES NOT STATED	CODE 0 1 9
CONTENT BLANK YES	0
CONTENT BLANK YES	0
	CONTENT BLANK YES NOT STATED ALZHEIMER'S DISEASE CONTENT BLANK YES NOT STATED CONDITION RELATED TO AGING CONTENT BLANK YES NOT STATED DEVELOPMENTALLY DELAYED CONTENT BLANK YES NOT STATED

A22B9	DON'T KNOW	
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9
A23	ARE YOU LIMITED IN KIND OR	AMOUNT OF ACTIVITY
A23I	IN RESIDENCE/INSTITUTION	
	CONTENT	CODE
	YES	1 2
	NO NOT STATED	9
A23II	IN OTHER ACTIVITIES OUTSIDE	RESIDENCE
	CONTENT	CODE
	YES	<u> </u>
	NO	1 2 9
	NOT STATED	9
<u>አ</u> ጋጓአ	LIMITED IN ACTIVITIES - OHES	דדבי האל דבי פאטדשי

A23A LIMITED IN ACTIVITIES - QUESTIONS 231 AND 2311

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

A23B1 MAIN CONDITION OR HEALTH PROBLEM (1)

CONTENT	CODE
ICD9 = 298	01
ICD9 = 331	02
ICD9 = 290	03
ICD9 = 311.0	04
ICD9 = 319.0	05
ICD9 = 295	06
ICD9 = 799	07
ICD9 = 300	08
ICD9 = 797.0	09
ICD9 = 310	10
ICD9 = 436.0	11
ICD9 = 780	12
ICD9 = ALL OTHER ICD9	13
OTHER INSTITUTIONS	96
BLANK	97
NOT STATED	99

COMMENTS

The underlying health problem or condition has been coded using the International Classification of Diseases, 9th Revision. The 2-digit codes appear on the datafile wich is maintained at Statistics Canada. The data presented in Field A23B1 represent the 12 most prevalent underlying health conditions or problems reported by individuals in special care institutions only. Records representing individuals in the "Other" institutions have been coded to 96.

- 01 : Other nonorganic psychoses
- 02 : Other cerebral degenerations
- 03 : Senile and presentle organic psychotic conditions
- 04 : Depressive disorder, not elsewhere classified
- 05 : Unspecified mental retardation
- 06 : Schizophrenic psychoses
- 07 : Other ill-defined and unknown causes of morbidity and mortality
- 08 : Neurotic Disorders
- 09 : Senility without mention of psychosis
- 10 : Specific nonpsychotic mental disorders following organic brain damage
- 11 : Acute but ill-defined cerebrovascular disease
- 12 : General symptoms
- 13 : All other health conditions or problems

A23B2 MAIN CONDITION OR HEALTH PROBLEM (2)

CONTENT	CODE
MENTAL DISORDERS	01
MENTAL RETARDATION	02
NERVOUS SYSTEM / SENSORY	03
CIRCULATORY SYSTEM	04
RESPIRATORY SYSTEM	05
MUSCULOSKELETAL SYSTEM	06
ARTHRITIS	07
CONGENITAL ANOMALIES	80
INJURY AND POISONING	09
OTHER	10
BLANK	97
NOT STATED	99

COMMENTS

This variable represents broad categories of the ICD-9 coding. (See Field A23B1). Responses by individuals in all institutions are included in this variable.

CODE	ICD-9
01	290.0-315.9,V25.2-V40.9,V41.4,V41.7, V57.3,V60.2-V71.9
02	317.0-319.0
03	320.0-389.9,V41.0-V41.3,V41.8,V42.5, V43.0,V43.1,V45.2,V53.1,V53.2, VP00-VP19,VT00-VT19
04	390.0-459.9,V42.2,V43.2-V43.4,V45.0, V53.3
05	460.0-519.9
06	710.0-738.9,V42.4,V42.8,V43.6,V43.7, V45.4,V49.1,V49.2,V53.8, VB13-VF19,VM00-VN19,VU00-VU19
07	VA00-VA19
08	740.0-759.9,VJ00-VK19
09	801.0-998.9,VG00-VH19,VL00-VL15
10	001.0-289.9,520.0-709.9,760.0-799.9, V22.2,V41.6,V42.0,V42.3,V42.9,V43.8, V44.0-V44.3,V44.5,V44.6,V45.1,V45.3, V45.8,V47.2-V47.4,V47.9,V50.1-V53.0, V53.6,V56.0,V56.8,V58.0-V58.2,V58.5, VR00-VS19

A25	<u>CONTENT</u> YES NO	E/INSTITUTION JUNE 3, 1986 CODE 1 2
В	NOT STATED SECTION B - SPECIA	9 L AIDS AND ASSISTANCE
B1	WHAT AIDS DO YOU U	SE
B1A	A HEARING AID	
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
BlB	OTHER AID(S) FOR T	HE HEARING IMPAIRED
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
B1C	OTHER MOBILITY AIDS	3
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
B1D	WALKING AIDS	
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9

NOT STATED

DETAILED DESCRIPTION OF VARIABLES

B1E	WHEELCHAIR	
	CONTENT	CODE
	BLANK	 0
	YES NOT STATED	1 9
	Not billing	-
B1F	OTHER AIDS FOR HANDS	OR ARMS
	CONTENT	CODE
	BLANK	0 1
	YES NOT STATED	9
BIG	NONE OF THE ABOVE	
	CONTENT	CODE
	BLANK	. 0
	YES NOT STATED	1 9
	1.02 02.11.20	-
B2	WHO SHOPS FOR GROCER	IES OR OTHER NECESSITIES
	CONTENT	CODE
	YOURSELF ALONE	1
	YOURSELF AND SOMEONE ELSE SOMEONE ELSE	2 3
	NOT STATED	9
20	TO MUTA DECLUSE OF V	AND CONDITION
В3	IS THIS BECAUSE OF YO	OUR CONDITION
	CONTENT	CODE
	BLANK	0
	YES NO	1 2
	NOT STATED	9
B4	ARE YOU HELPED BY SOM	MEONE WORKING IN INSTITUTION
	CONTENT	CODE
	BLANK	0 0
	YES	1
	NO CHARED	2

B5 ARE YOU HELPED BY YOUR FAMILY OR FRIEND

CONTENT	<u>CODE</u>
BLANK	0
YES	1
NO	2
NOT STATED	9

B6 WHO USUALLY LOOKS AFTER PERSONAL FINANCES

CONTENT	CODE
YOURSELF ALONE	1
YOURSELF AND SOMEONE ELS	E 2
SOMEONE ELSE	3
NOT STATED	9

B7 IS THIS BECAUSE OF YOUR CONDITION

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

B8 ARE YOU HELPED BY SOMEONE WORKING AT INSTITUTION

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

B9 ARE YOU HELPED BY A LEGAL SERVICE

CONTENT	CODE
BLANK	0
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

B10 A	RE YOU	HELPED	BY	YOUR	FAMILY	OR	FRIEND
-------	--------	--------	----	------	--------	----	--------

CONTENT	CODE
BLANK	0
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

B11 DO YOU GET HELP WITH PERSONAL CARE

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

B14 MOVING WITHIN THE RESIDENCE

CONTENT	CODE
BY YOURSELF ALONE	1
BY YOURSELF AND SOMEONE ELSE	2
ONLY WITH SOMEONE ELSE	3
NOT AT ALL	4
NOT STATED	9

C SECTION C - TRANSPORTATION

C1 PREVENTED FROM LEAVING RESIDENCE DUE TO CONDITION

CODE
1
2
9

C2 WOULD YOU USE SPECIAL TRANSPORTATION IF AVAILABLE

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

C3 DO YOU REQUIRE ATTENDANT ON SHORT TRIPS

CONTENT	CODE
BLANK	0
YES	1
NO	2
NOT STATED	9

C4 DO YOU HAVE TROUBLE AS A PASSENGER

CONTENT	CODE
BLANK	0
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

C5 DO YOU NEED SPECIAL TRANSPORTATION SERVICE

CONTENT	CODE
BLANK	0
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

C6 IS SPECIAL SERVICE AVAILABLE IN YOUR AREA

CONTENT	CODE
BLANK	0
YES	1
NO	2
DON'T KNOW	3
NOT STATED	9

C7 HOW OFTEN DO YOU USE THIS SERVICE

CONTENT	CODE
BLANK	0
ALMOST EVERY DAY	1
OCCASIONALLY	2
SELDOM/NEVER	3
NOT STATED	9

C8 WHY DON'T YOU USE SERVICE MORE OFTEN

C8A	SERVICE NOT NEEDED MOR	E OFTEN
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
C8B	OTHER	
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9
C9	LOCAL PUBLIC TRANSPORT	AVAILABLE IN YOUR AREA
	CONTENT BLANK YES NO DON'T KNOW NOT STATED	CODE 0 1 2 3 9
C10	HOW OFTEN USE PUBLIC TR	RANSPORTATION SERVICES
	CONTENT BLANK ALMOST EVERY DAY OCCASIONALLY SELDOM/NEVER	CODE 0 1 2 3

C11 DO YOU HAVE ANY TROUBLE USING PUBLIC TRANSPORT.

CODE
0
1
2
9

NOT STATED

C12 KIND OF TROUBLE USING PUBLIC TRANSPORTATION

C12A	GETTING TO THE STOP	
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
C12B	WAITING AT THE STOP	
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
C12C	GETTING ON AND OFF	
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
C12D	INSUFFICIENT SPACE TO	SIT OR STAND IN VEHICLE
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9
C12E	STANDING IN VEHICLE W	WHILE IT IS MOVING
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9
C12F	OBTAINING INFORMATION	ABOUT TIMETABLES, ROUTES
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1

C12G	OTHER	
	CONTENT BLANK YES NOT STATED	CODE 0 1 9
C12H	DON'T KNOW	
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9
C13	IS THERE A TAXI SERVICE	IN YOUR AREA
	CONTENT BLANK YES NO DON'T KNOW NOT STATED	CODE 0 1 2 3 9
C14	HOW OFTEN DO YOU USE TH	IS TAXI SERVICE
	CONTENT BLANK ALMOST EVERY DAY OCCASIONALLY SELDOM/NEVER NOT STATED	CODE 0 1 2 3 9
C15	IS THIS BECAUSE OF YOUR	CONDITION
	CONTENT BLANK YES NO NOT STATED	CODE 0 1 2 9

D SECTION D - ACCOMMODATION - EDUCATION AND EXPENSES

D1.	DO YO	U NEED	SPECIAL	FEATURES	TO	ENTER	/ LEAVE	RES.

CONTENT	CODE
YES	1
NO	2
NOT STATED	9

D2 SPECIAL FEATURES NEEDED TO ENTER OR LEAVE RES.

D2A ACCESS RAMPS

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

D2B WIDENED DOORWAYS OR HALLWAYS

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

D2C A STREET LEVEL ENTRANCE

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

D2D DOORS THAT OPEN AUTOMATICALLY

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

D2E AN ELEVATOR OR LIFT DEVICE

CONTENT	CODE
BLANK	0
YES	1
NOT STATED	9

D2F	ACCESSIBLE PARKING		
	CONTENT BLANK YES NOT STATED	CODE 0 1 9	
D2G	SOME OTHER ARCHITECTURAL	FEATURES	
	CONTENT BLANK YES NOT STATED	CODE 0 1 9	
D2H	HAND RAILS		
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9	
D2I	SOME OTHER FEATURE		
	CONTENT BLANK YES NOT STATED	<u>CODE</u> 0 1 9	
D5	DO YOU HAVE OUT-OF-POCKET	EXPENSES	NOT REIMBURSED
	CONTENT YES NO NOT STATED	<u>CODE</u> 1 2 9	
D6	OUT-OF-POCKET EXPENSES NOT REIMBURSED		
D6A1	PRESCRIPTION AND NON-PRESCRIPTION DRUGS		
	CONTENT BLANK YES NONE NOT STATED	CODE 0 1 2 9	

D6B1	PURCHASE AND MAINTAINANCE O	F SPECIAL AIDS
	CONTENT BLANK YES NONE NOT STATED	CODE 0 1 2 9
D6C1	HEALTH AND MEDICAL SERVICES	NOT COVERED
	CONTENT BLANK YES NONE NOT STATED	CODE 0 1 2 9
D6D1	TRANSPORTATION	
	CONTENT BLANK YES NONE NOT STATED	CODE 0 1 2 9
D6E1	OTHER	
	CONTENT BLANK YES NONE NOT STATED	CODE 0 1 2 9
DERIVED DERIVED VARIABLES		
SEX	SEX	
	CONTENT FEMALE MALE	CODE 1 2

AGEGRP1 AGE GROUP (1)

CONTENT	CODE
AGE 15-24	01
AGE 25-34	02
AGE 35-44	03
AGE 45-54	04
AGE 55-64	05
AGE 65-74	06
AGE 75-84	07
AGE 85+	80

COMMENTS

This variable represents age groups for individuals in all institution types.

AGEGRP2 AGE GROUP (2)

CONTENT	<u>CODE</u>
AGE 15-24	01
AGE 25-34	02
AGE 35-44	03
AGE 45-54	04
AGE 55-64	05
AGE 65-69	06
AGE 70-74	07
AGE 75-79	80
AGE 80-84	09.
AGE 85-89	10
AGE 90-94	11
AGE 95+	12
N/A - OTHER INSTITUTIONS	96

COMMENTS

This variable represents age groups for individuals in special care institutions (INSTCODE \approx 1) only. Records representing individuals in the "Other" institutions are given a not applicable code (96).

WT VARIABLE FOR WEIGHTED ESTIMATES

COMMENTS

This derived variable is an estimate of the number of people the record represents. Each record has been assigned a weight such that the sum of the weights of all the records corresponds, as closely as possible, to the figures produced for the institution population from the 1986 Census. The weight was calculated based upon the size and type of institution. The value of the weight is also dependent on the sample design of the survey. The value of the weight is stored with an implied decimal point after the fifth digit, with each value having four decimal places. All tabulations and/or calculations must be weighted to reflect the correct estimates of the population.

INSTCODE INSTITUTIONAL TYPE

CONTENT	CODE
SPECIAL CARE	1
OTHER	2

COMMENTS

This variable contains the institution codes:

- Special care homes and institutions for the elderly and chronically ill.
- 2. Other types of institutions such as:
 - Orphanages and children's homes
 - General hospitals
 - Psychiatric hospitals
 - Treatment centres and institutions for the physically handicapped.

HLE HIGHEST LEVEL OF EDUCATION

CONTENT	CODE
UNKNOWN	1
NO FORMAL SCHOOLING	2
1-8 YEARS	3
SECONDARY	4
POST SECONDARY	5

COMMENTS

This variable summarizes the respondents answers to questions D3 and D4. D3 and D4 have, therefore, been removed from the file.

MOBILITY FLAG TO INDICATE MOBILITY DISABILITY

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person has a mobility disability. This variable is derived from the responses to questions A1 to A5, inclusively.

AGILITY FLAG TO INDICATE AGILITY DISABILITY

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person has an agility disability. This variable is derived from the responses to question A6 to A12, inclusive.

SEEING FLAG TO INDICATE SEEING DISABILITY

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person has a seeing disability. This variable is derived from the responses to questions A16 and A17.

HEARING FLAG TO INDICATE HEARING DISABILITY

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person has a hearing disability. This variable is derived from the responses to questions A13 and A14.

SPEAKING FLAG TO INDICATE SPEAKING DISABILITY

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person has a speaking disability. This variable is derived from the response to question A19.

OTHER

FLAG TO INDICATE OTHER NATURE OF DISABILITY

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person has an "other" disability. This variable is derived from the responses to question A22 and A23. The "other" category includes individuals who reported having a learning disability, a psychiatric disability, a mental handicap, and/or a physical condition which has resulted in an emotional or nervous disability.

UNKNOWN FLAG TO INDICATE NATURE OF DISABILITY UNKNOWN

CONTENT	CODE
BLANK	0
YES	1

COMMENTS

This is a derived variable. A value = 1 in this field indicates that this person is disabled but the nature of his/her disability is unknown. To be classified as disability = unknown, the individual must have responded "No" or "Not stated" to questions A1 through A19, A22 and A23, and responded "Yes" to question A21.

SEVERITY SEVERITY INDEX

CONTENT	<u>CODE</u>
MILD	1
MODERATE	2
SEVERE LEVEL1	3
SEVERE LEVEL2	4
SEVERE LEVEL3	5

COMMENTS

Severity is a derived variable which has been created based on the individual's response to the screening questions in Section A. For details as to the algorithm used and how it was developed, the user should reference "Severity Score for Adult Residents of Institutions", Health and Activity Limitation Survey, Marie Brodeur, October, 1988. This document is available from Statistics Canada (see address at beginning of documentation).

APPENDIX G

Weighted and Unweighted Frequencies

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
PROVINCE		
OTAL	242,379	17,434
IEWFOUNDLAND	3,195	790
RINCE EDWARD ISLAND	786	314
OVA SCOTIA	5,859	1,004
IEW BRUNSWICK	5,835	1,085
UEBEC	63,975	3,337
NTARIO	94,838	4,854
ANITOBA	9,241	1,252
ASKATCHEMAN	9,721	1,304
ASKAT CHERAN LBERTA	20,443	
RITISH COLUMBIA		1,655
	28,487	1,839
PROXY	405.445	7 000
ON-PROXY	105,465	7,080
ROXY	136,215	10,266
OT STATED	699	88
A1		1
ES	171,491	12,482
0	70,778	4,945
OT STATED	110	7
A1A		
LANK	70,888	4,952
ES	130,311	9,578
0	40,633	2,877
OT STATED	547	27
A 2		
ES	170,836	12,543
0	71,321	4,876
OT STATED AZA	222	15
LANK	71,543	4,891
ES	130,738	9,698
0	39,844	2,820
T STATED	254	25
A3		
ES	174,456	12,565
0	67,661	4,846
OT STATED	263	23
A3A	203	2.3
LANK	67,923	4,869
ES	146,500	10,715
))	27,637	10,715
OT STATED		1,013
A4	319	3/
ES	400 777	7 -74
	102,337	7,530
) OT STATED	139,811	9,885
OT STATED	231	19
AAA	4,5 4,5	
ANK	140,042	9,904
S	62,285	4,663
) 	39,613	2,835
OT STATED	438	32
A5]	
S	169,409	12,199
1	72,624	5,219
OT STATED	346	16
A5A	1	
ANK	72,970	5,235
S	129,815	9,588
.3		
. 	39,356	2,585

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNWEIGHTED
A6		
ES	146,311	10,661
0	95,777	6,757
OT STATED	291	16
A6A		1
LANK	96,068	6,773
ES	106,889	8,088
))	39,257	1
OT STATED	,	2,552
	165	21
A7	400 704	
S	128,724	9,643
) 	113,431	7,771
OT STATED	224	20
A7A		1
_ANK	113,655	7,791
S	83,316	6,371
)	45,252	3,254
OT STATED	155	18
AB		1
S	101,961	7,690
)	140,226	9,723
T STATED	192	7,723
ASA	172	[[
S	101,961	7,690
		
)	140,226	9,723
OT STATED	192	21
_A9		
ES .	205,212	14,765
	35,144	2,543
T STATED	2,023	126
A9A	1	
ANK	37,167	2,669
S	186,875	13,442
	17,887	1,278
T STATED	451	45
A10]
S	75,009	5,641
. 	167,095	11,778
T STATED	_ · · · · · · · · · · · · · · · · · · ·	
A10A	275	15
	1	
ANK	167,370	11,793
\$	28,590	2,166
	46,219	3,451
T STATED	200	24
A11		
S	83,606	6,167
	158,679	11,258
T STATED	95	9
A11A		
ANK	158,773	11,267
S	36,831	2,844
	46,370	3,291
T STATED	405	32
A12	703	36
	404 004	6 400
\$	106,086	8,180
	135,883	9,201
T STATED	410	53
A12A	1	
ANK	136,293	9,254
\$	76,544	5,977
	29,123	2,165
	4	-
T STATED	419	38

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNWEIGHTED
A13		
ES	74,810	5,289
0	167,031	12,085
OT STATED	538	60
A13A	350	
LANK	167,569	12,145
ES .	16,006	1,024
0	58,636	4,235
	168	30
DT STATED	100	30
_A14	440 677	7 707
ES	110,477	7,797
)	131,111	9,558
OT STATED	790	79
A14A		
_ANK	131,902	9,637
is .	55,369	3,731
)	54,803	4,035
T STATED	305	31
A15		i
ES	154,306	11,035
	64,378	4,686
DNT KNOW	16,360	1,391
OT STATED	7,335	322
A16	',===	
S	99,345	6,918
	141,313	10,389
OT STATED	1,721	127
A16A	1,7,2,	l 'E'
LANK	143,034	10,516
	•	
ES .	55,976	3,811
)	43,033	3,062
OT STATED	336	45
_A17	1	
:S	64,830	4,615
)	176,388	12,730
T STATED	1,160	89
A17A	1	
ANK	177,549	12,819
S	32,001	2,194
	32,433	2,375
OT STATED	396	46
A18		1
S	105,938	7,324
-	136,441	10,110
A18A		,
ANK	136,441	10,110
S .	7,597	619
	94,707	6,379
NT KNOW	_	
	2,539	226
T STATED	1,095	100
A18B		
ANK	232,060	16,560
3	4,166	290
	5,570	494
T STATED	583	90
A18C1		
ANK	136,441	10,110
S	65,996	4,477
	39,087	2,776
T STATED	854	71
· vinier	7007	, ı

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNWEIGHTED
A18C2		
BLANK	136,441	10,110
YES	15,550	9 80
10	89,148	6,227
NOT STATED	1,240	117
A18C3	!	
BLANK	136,441	10,110
/ES	2,997	211
10	101,346	6,975
OT STATED	1,595	138
A18C4		
LANK	136,441	10,110
ES	2,815	189
0	101,693	7,024
OT STATED	1,430	111
A19 ES	94 757	4 444
0	81,353 160,735	6,161
IOT STATED	291	11,249
A19AI	271	1
LANK	161,026	11,273
OMPLETELY	11,004	767
ARTIALLY	33,368	2,532
OT AT ALL	32,725	2,480
ONT KNOW	3,491	300
OT STATED	764	82
A19AII	1.04	1
LANK	161,026	11,273
OMPLETELY	4,697	331
ARTIALLY	35,360	2,636
OT AT ALL	36,886	2,784
ONT KNOW	3,414	295
IOT STATED	996	115
A19AV		ļ
LANK	161,026	11,273
ARTIALLY	32,750	2,454
OT AT ALL	44,705	3,398
ONT KNOW	2,273	201
OT STATED	1,624	108
A20		
ES	240,354	17,311
0	2,025	123
A20A1	4	
CD9 = VA00 CD9 = 787 0	13,771	1,048
CD9 = 797.0 CD9 = 331	9,713	683
CD9 = 331 CD9 = VP15-19	9,445	689
CD9 = 290	8,190 9,721	658 606
CD9 = 290 CD9 = 436.0	9,721 9,454	604
CD9 = 456.0 CD9 = 780	7,491	580 572
CD9 = 298	5,580	473
CD9 = VH01-06	5,194	473 368
CD9 = 429	4,341	356
D9 = 332	5,349	350
D9 = VA01-06	5,732	329
D9 = 319.0	4,844	315
109 = 250	3,575	286
209 = 310	3,016	262
109 = 440	3,686	202 224
D9 = 389	3,458	198
CD9 = 428	3,445	208
CD9 = VS02-06	3,087	208 197
CD9 = 295	3,058	185
.07 - 275 CD9 = 340.0		
D9 = 369.0	1,821 1,482	161 147
	1 13404	143

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	HEIGHTED	UNWEIGHTED
A20A1		
ICD9 = 437	2,992	137
CCD9 = VU01-06	1,663	126
ICD9 = 799	1,258	112
CCD9 = ALL OTHER ICD9	55,060	3,702
OTHER INSTITUTIONS	47,305	3,855
BLANK	1,431	55
IOT STATED A20A2	7,217	558
MENTAL DISORDERS	32,384	2,254
MENTAL RETARDATION	13,187	1,100
HERVOUS SYSTEM / SENSORY	54,517	3,943
IRCULATORY SYSTEM	38,709	2,457
RESPIRATORY SYSTEM	4,445	298
NSCULOSKELETAL SYSTEM	9,728	706
RTHRITIS	23,268	1,658
ONGENITAL ANOMALIES	2,891	211
NJURY AND POISONING	9,528	736
THER	40,944	3,077
LANK	2,025	123
OT STATED A20B	10,753	871
XISTED AT BIRTH	20,133	1,696
S A DISEASE OR ILLNESS	73,380	5,495
AUSED BY A DISEASE OR ILLNESS	40,505	2,642
AUSED BY WORK OR ACCIDENT	14,609	1,056
AUSED BY A STROKE	19,523	1,370
AUSED BY AGING	51,625	3,420
AUSED BY OTHER CAUSE	5,813	384
ON'T KNOW	3,107	261
LANK	2,025	123
IOT STATED	11,658	987
A20C		
LANK	2,025	123
ES	136,489	9,834
0	92,489	6,584
OT STATED	11,376	893
A20D1		
CD9 = VA00	9,833	690
CD9 = 250.0	5,811	391
CD9 = 389	5,805	334
CD9 = 780	4,075	295
CD9 = 429 CD9 = 401	3,838	261
CD9 = 401 CD9 = VH01-06	4,487 3,443	270 254
CD9 = 797.0	2,773	256 247
CD9 = 797.0 CD9 = 366	3,712	247
CD9 = 298	2,720	217
CD9 = 290	2,736	190
CD9 = 428	3,187	181
CD9 = VA01-06	1,818	113
CD9 = ALL OTHER ICD9	57,670	4,198
THER INSTITUTIONS	47,305	3,855
LANK	81,876	5,561
OT STATED	1,289	164
A20D2		•
ENTAL DISORDERS	11,041	896
ENTAL RETARDATION	1,607	104
ERVOUS SYSTEM / SENSORY	30,815	2,225
[RCULATORY SYSTEM	24,981	1,670
ESPIRATORY SYSTEM	4,310	289
JSCULOSKELETAL SYSTEM	5,187	401
RTHRITIS	15,800	1,082
ONGENITAL ANOMALIES	1,346	116
JURY AND POISONING	6,643	486

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Meighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
A20D2		
OTHER	33,863	2,483
BLANK	105,890	7,600
NOT STATED	897	82
A20E		
EXISTED AT BIRTH	7,293	595
IS A DISEASE OR ILLNESS	38,777 74,994	3,016
CAUSED BY A DISEASE OR ILLNESS CAUSED BY WORK OR ACCIDENT	36,991 8,323	2,437 558
CAUSED BY A STROKE	4,730	350
CAUSED BY AGING	29,769	2,060
CAUSED BY OTHER CAUSE	5,330	356
PONT'T KNOW	3,648	285
BLANK	106,207	7,615
IOT STATED	1,311	162
A21I		
/ES	178,529	12,956
IO IOT STATED	62,871 979	4,376
AZIII	7/7	102
YES	195,353	14,210
10	45,676	3,102
IOT STATED	1,349	122
A21A		
ES	197,517	14,354
0	44,862	3,080
A21B1 CD9 = VA00	47 (50	050
CD9 = 331	13,650 9,051	950 647
CD9 = VP15-19	7,150	618
CD9 = 797.0	6,759	579
CD9 = 290	8,717	578
CD9 = 780	6,400	524
CD9 = 436.0	8,233	504
CD9 = 298	6,202	453
CD9 = 429	3,850	331
CD9 = 332 CD9 = VH01-06	4,399	292
CD9 = 319.0	4,089 3,239	289 251
CD9 = VA01-06	4,825	222
CD9 = 310	2,463	232
CD9 = 428	2,645	190
CD9 = 440	2,761	183
CD9 = 340.0	1,731	154
CD9 = 250	2,439	146
CD9 = 295 CD9 = 369.0	2,502	163
CD9 = 369.0 CD9 = VS02-06	1,561	157
CD9 = 799	2,056 1,204	129 106
CD9 = 437	2,461	106
CD9 = 389	1,229	95
CD9 = ALL OTHER ICD9	47,241	3,200
THER INSTITUTIONS	47,305	3,855
LANK	36,246	2,269
OT STATED	1,970	213
A21B2 Ental Disorders	74.044	0.045
ENTAL DISORDERS ENTAL RETARDATION	31,011	2,215 899
ERVOUS SYSTEM / SENSORY	46,941	3,544
IRCULATORY SYSTEM	31,820	2,107
SPIRATORY SYSTEM	3,581	250
USCULOSKELETAL SYSTEM	7,373	530
RTHRITIS	21,517	1,445
ONGENITAL ANOMALIES	2,157	157
JURY AND POISONING	7,801	593

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
A21B2		
OTHER	34,070	2,556
BLANK	44,862	3,080
NOT STATED	1,122	58
A21C		
EXISTED AT BIRTH	15,976	1,387
IS A DISEASE OR ILLNESS	57,002	4,321
CAUSED BY A DISEASE OR ILLNESS	40,609	2,684
CAUSED BY MORK OR ACCIDENT	11,482	831
CAUSED BY A STROKE	17,526	1,226
CAUSED BY AGING	42,502	3,043
AUSED BY OTHER CAUSE	4,767	336
ON'T KNOM	3,490	246
ELANK Iot stated	44,862 4,164	3,080 280
A21D	4,104	200
LANK	44,852	3,079
'ES	60,283	4,576
10	135,616	9,687
OT STATED	1,627	92
A21E1	1	[
CD9 = VA00	3,997	276
CD9 = 250	1,492	181
CD9 = 389	2,503	136
CD9 = 401	2,504	161
CD9 = 797.0	1,466	104
CD9 = 780	1,426	93
CD9 = ALL OTHER ICD9	33,049	2,580
THER INSTITUTIONS	47,305	3,855
LANK	147,554	9,940
OT STATED	1,084	108
A21E2		
ENTAL DISORDERS	4,897	414
ENTAL RETARDATION	335	23
ERVOUS SYSTEM / SENSORY	13,426	1,016
IRCULATORY SYSTEM	10,192	762
ESPIRATORY SYSTEM NSCULOSKELETAL SYSTEM	2,064	149 183
NTHRITIS	2,500 5,550	413
ONGENITAL ANOMALIES	573	56
NJURY AND POISONING	2,158	202
THER	17,826	1,307
LANK	182,025	12,856
OT STATED	834	53
A21F	32.	ļ
XISTED AT BIRTH	2,842	230
S A DISEASE OR ILLNESS	18,306	1,441
AUSED BY A DISEASE OR ILLNESS	14,819	1,109
AUSED BY WORK OR ACCIDENT	2,903	243
AUSED BY A STROKE	2,33 9	137
AUSED BY AGING	13,218	896
AUSED BY OTHER CAUSE	2,312	190
DN'T KNOW	1,795	133
LANK	182,036	12,857
OT STATED	1,808	198
A22		
S	160,969	11,508
	81,118	5,881
OT STATED	29 2	45
A22A		
LANK Es	81,410	5,926
ES N	25,862	2,132
) To etated	131,038	9,058
OT STATED	4,069	318

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
A22B1		
BLANK	222,420	16,035
YES	18,941	1,295
NOT STATED	1,019	104
A22B2		
BLANK	224,969	16,084
/ES	16,391	1,246
OT STATED	1,019	104
A22B3	1,017	1 '*'
LANK	236,421	16,930
'ES	4,939	400
OT STATED	1,019	104
A22B4	1,017	
AZZDY LÂNK	226,345	16,271
ES	15,015	1,059
		104
OT STATED	1,019	''*
A22B5	450 304	44 004
LANK	150,724	11,201
ES	90,636	6,129
OT STATED	1,019	104
A22B6	1	
LANK	218,438	15,436
ES	22,922	1,894
OT STATED	1,019	104
A22B7		
LANK	233,346	16,621
ES	8,014	709
OT STATED	1,019	104
A22B8		
LANK	222,863	15,893
ES	18,497	1,437
OT STATED	1,019	104
A22B9	1,017	'*'
LANK	238,807	17,173
ES	2,553	157
OT STATED	1,019	104
	1,019	104
A23I	102,172	7,363
ES .		
0	138,983	9,949
OT STATED	1,224	122
A23II		
ES	109,797	8,038
0	130,987	9,254
OT STATED	1,595	142
A23A	1	
ES	112,137	8,177
0	129,958	9,218
OT STATED	283	39
A23B1		
CD9 = 298	10,996	780
CD9 = 331	8,075	539
CD9 = 290	8,801	530
CD9 = 311.0	4,671	375
CD9 = 319.0	4,311	360
D9 = 295	5,426	345
CD9 = 799	4,078	265
CD9 = 300	3,744	256
D9 = 797.0	3,137	200
109 = 310	2,141	194
CD9 = 436.0	1,523	103
CD9 = 456.0 CD9 = 780	1,770	117
CD9 = ALL OTHER ICD9	21,557	1,377
THER INSTITUTIONS	47,305	3,855
LANK	113,509	7,986
OT STATED	1,334	152

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNWEIGHTE
A23B2		
MENTAL DISORDERS	57,674	4,174
MENTAL RETARDATION	14,054	1,213
NERVOUS SYSTEM / SENSORY	16,587	1,167
CIRCULATORY SYSTEM	7,560	467
RESPIRATORY SYSTEM	274	13
MUSCULOSKELETAL SYSTEM	294	24
ARTHRITIS	994	62
CONGENITAL ANOMALIES	876	74
INJURY AND POISONING	362	45
OTHER	12,844	894
BLANK	130,241	9,257
NOT STATED	618	44
A25	ì	
YES	225,225	16,259
10	16,422	1,089
NOT STATED	732	86

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
B1A		
LANK	220,203	15,898
ES .	20,570	1,402
OT STATED	1,606	134
B1B	.,,,,,	'
LANK	239,560	17,237
ES	1,213	63
		134
T STATED	1,606	154
B1C		
ANK	219,371	15,637
\$	21,402	1,663
T STATED	1,606	134
B1D		
ANK	175,499	12,942
S	65,274	4,358
T STATED	1,606	134
B1E	•	Ì
ANK	153,479	10,625
S	87,294	6,675
T STATED	1,606	134
B1F	-	
ANK	237,308	17,067
S .	3,464	233
T STATED	1,606	134
B1G	1,000	134
ANK	144,891	10,555
	= = = = = = = = = = = = = = = = = = = =	6,745
5	95,881	
T STATED	1,606	134
B2		
URSELF ALONE	20,306	1,497
URSELF AND SOMEONE ELSE	42,125	2,871
MEONE ELSE	178,358	12,955
T STATED	1,590	111
B3		
NK .	21,886	1,599
5	212,316	15,408
	7,602	367
STATED	575	60
B4		-
ANK	30,063	2,026
S	85,674	7,351
•	126,562	8,050
STATED	80	7
	80	,
B5	70.0(7	2.00/
ANK	30,063	2,026
	154,660	10,514
	55,349	4,747
STATED	2,307	147
B6		
JRSELF ALONE	28,873	2,007
RSELF AND SOMEONE ELSE	20,241	1,473
EONE ELSE	191,353	13,820
STATED	1,912	134
B7	[
.NK	30,741	2,127
	201,664	14,623
	9,367	627
STATED	607	57
B8	""	21
	40,715	2 044
ANK	· · · · · · · · · · · · · · · · · · ·	2,811 5,779
\$	62,859	5,779
	138,720	8,832
T STATED	85	12

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	MEIGHTED	UNMEIGHTED
B9		
BLANK	40,715	2,811
YES	32,915	1,839
NO	157,582	11,949
DON'T KNOM	10,954	806
NOT STATED	212	29
B10	 	
BLANK	40,715	2,811
YES	141,008	9,468
NO NO	58,198	4,953
DON'T KNOW	2,392	189
NOT STATED	65	13
B11		
YES	178,663	13,243
NO CONTRACTOR OF THE CONTRACTO	61,977	4,093
NOT STATED B14	1,738	98
BY YOURSELF ALONE	142,653	9,861
BY YOURSELF AND SOMEONE ELSE	31,653	2,495
ONLY WITH SOMEONE ELSE	50,505	3,952
NOT AT ALL	15,669	995
NOT STATED	1,900	131

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
C1		1
'ES	84,955	5,889
0	155,904	11,454
IOT STATED	1,520	91
C2	1,520	71
LANK	157,418	11,542
ES		
	16,909	1,073
0	65,704	4,654
OT STATED	2,348	165
C3		
LANK	86,475	5,980
ES	118,220	8,785
0	37,569	2,641
DT STATED	115	28
C4		
LANK	86,475	5,980
ES	34,924	2,742
0	118,842	8,526
ON'T KNOM	1,991	157
OT STATED	147	29
C5	'*'	[
LANK	96 567	F 00F
	86,567	5,985
ES	57,381	4,596
	95,859	6,640
ON'T KNOW	2,536	208
DT_STATED	36	5
C6		į
LANK	184,998	12,838
ES	49,293	3,901
	7,626	634
DN'T KNOM	277	18
DT STATED	185	43
C7		
LANK	193,086	13,533
LMOST EVERY DAY	10,382	764
CASIONALLY	21,589	1,643
LDOM/NEVER	17,260	1,488
OT STATED	62	6
CSA	1	· ·
LANK	213,422	14,950
S		-
S STATED	28,138	2,421
	819	63
C8B		
ANK	230,351	16,617
:S	11,209	754
DT STATED	819	63
C9	ļ l	
ANK	86,661	5,998
SS .	110,439	7,704
	44,417	3,670
N'T KNOM	826	57
T STATED	36	5
C10]	_
ANK	131,940	9,730
MOST EVERY DAY	7,366	501
CASIONALLY	8,539	
		581 (50)
LDOM/NEVER	94,222	6,596
T STATED	313	26
C11		
ANK	131,940	9,730
5	78,875	5,601
	31,223	2,075
T STATED	341	28

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNWEIGHTED
C12A		
BLANK	193,361	13,747
YES	48,697	3,642
NOT STATED	321	45
C12B	·	
BLANK	199,568	14,209
YES	42,490	3,180
NOT STATED	321	45
C12C]
LANK	187,136	13,445
ES	54,922	3,944
IOT STATED	321	45
C12D		
LANK	222,281	15,881
ZES	19,777	1,508
OT STATED	321	45
C12E	7.	1
LANK	202,749	14,477
ES	39,309	2,912
OT STATED	321	45
C12F	361	75
LANK	222,197	15,965
ES	19,861	1,424
ES OT STATED	321	1 '
C12G	321	45
- · · -	04/ 0/5	45 770
LANK	216,065	15,378
ES	25,993	2,011
OT STATED	321	45
C12H		
LANK	241,586	17,309
ES	472	80
OT STATED	321	45
C13	1	
LANK	86,730	5,999
ES	139,784	10,216
0	14,416	1,134
ON'T KNOM	1,264	64
OT_STATED	186	21
C14		
LANK	102,595	7,218
LMOST EVERY DAY	6,287	399
CCASIONALLY	22,767	1,594
ELDOM/NEVER	110,527	8,196
DT STATED	204	27
C15		
LANK	102,595	7,218
ES	67,667	5,388
0	71,929	4,818
OT STATED	188	10

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
D1		
ES	125,097	9,683
0	115,390	7,632
OT STATED	1,892	119
D2A	1,0/2	117
LANK	168,075	11,485
ES	72,670	5,834
OT STATED	1,635	115
•	1,635	115
D2B	447 497	44 474
LANK	167,683	11,431
ES	73,061	5,888
DT STATED	1,635	115
D2C		
LANK	158,503	10,579
S	82,242	6,740
OT STATED	1,635	115
D2D		!
LANK	177,152	11,970
ES	63,592	5,349
DT STATED	1,635	115
D2E		
_ANK	156,060	10,602
ES	84,685	6,717
OT STATED	1,635	115
D2F	1,000	1
LANK	203,135	14,304
		3,015
ES	37,609	
DT STATED	1,635	115
D2G		
LANK	238,757	17,158
S	1,987	161
DT STATED	1,635	115
D2H		
LANK	164 ,852	11,587
ES .	75,893	5,732
OT STATED	1,635	115
D2I		
.ANK	233,613	16,805
:S	7,132	514
OT STATED	1,635	115
05		1
SS	56,655	4,135
. .)	181,921	12,871
T STATED	3,803	428
	3,003	720
D6A1	195 497	47 004
ANK S	185,623	13,294
	19,730	1,553
NE TOTATER	29,709	2,003
T STATED	7,317	584
D6B1		
ANK	185,637	13,295
S	14,908	1,090
NE	37,294	2,671
T STATED	4,541	378
D6C1		
ANK	185,712	13,297
S	8,736	534
NE	42,870	3,199
T STATED	5,061	404
D6D1	5,001	777
ANK	185,718	13,298
S ME	9,450	721
NE	42,263	2,979
T STATED	4,947	436

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

-Continued

FIELD DESCRIPTION	WEIGHTED	UNMEIGHTED
D6E1		
BLANK	185,724	13,299
YES	13,651	973
NONE	38,393	2,750
NOT STATED	4,611	412

HALS MICRO DATA FILE, FOR CANADA , Distribution of counts for disabled adults and seniors in institutions Weighted / Unweighted.

FIELD DESCRIPTION	WEIGHTED	UNWEIGHTED
SEX		
FEMALE	157,953	11,218
ALE	84,426	6,216
AGEGRP1	·	
AGE 15-24	5,826	623
AGE 25-34	10,009	823
AGE 35-44	7,994	641
AGE 45-54	7,979	667
IGE 55-64	15,812	1,165
AGE 65-74	35,354	2,454
GE 75-84	83,807	5,513
GE 85+	75,598	5,548
AGEGRP2	1,2	- /
NGE 15-24	783	66
GE 25-34	2,740	182
GE 35-44	2,729	205
GE 45-54	4,256	340
GE 55-64	11,235	769
IGE 65-69	10,099	709
GE 70-74	18,502	1,255
GE 75-79	32,327	2,077
GE 80-84	<u> </u>	
	43,390	2,872
GE 85-89	38,881	2,849
GE 90-94	22,618	1,658
GE 95+	7,515	597
THER N/A	47,305	3,855
INSTCODE		
PECIAL CARE	195,074	13,579
THER_	47,305	3,855
HLE		
PIKNOHN	42,441	3,107
O FORMAL SCHOOLING	24,688	2,118
-8 YEARS	99,333	6,768
ECONDARY	53,141	3,830
OST SECONDARY	22,776	1,611
MOBILITY		
LANK	42,291	3,025
ES	200,088	14,409
AGILITY		
LANK	27,560	2,029
ES	214,819	15,405
SEEING		•
LANK	136,441	10,110
ES	105,938	7,324
HEARING	, , ,	•
LANK	130,279	9,537
ES	112,100	7,897
SPEAKING	(
LANK	161,026	11,273
ES	81,353	6,161
OTHER	1	• , , , ,
LANK	63,972	4,513
S	178,406	12,921
UNKNOMN	1.0,700	16)761
ANK	241,686	17,372
ES CENEBITY	693	62
SEVERITY	1 24 222	4 4 4 4 4
ILD	21,299	1,499
ODERATE	44,468	3,170
EVERE LEVEL1	54,872	3,646
EVERE LEVEL2	58,561	4,293
EVERE LEVEL3	63,178	4,826



APPENDIX H

Sampling Variability Tables

DISABLED ADULT POPULATION IN INSTITUTION

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50	0	9.0
		•
	0	2.7
	0	0.0
	•	7.7
	0	5.7
	•	4.1
	•	2.6
	0.05	
	90.0	30.25
	90.0	2.6
	90.0	2B. 29
170		
180	0	26.67
190	0	75.05
200	0	
N	0) «
T,	0.10	
275	٦.	21.58
0	0.12	20.46
~	0.13	
10	0.14	19,12
~	0.15	18.47
0	0.16	17.89
2	0.17	17,35
Ę	0.18	16.86
\sim	0.19	16.41
500	0.20	15,99
2	0.21	15,61
Ę	0.22	15.25
0	0.24	14.60
0	0.28	13.51
0	0.32	12.64
•	0.36	11.91
0	05.0	11.30
S)	0.51	10.10
0	0.61	•
L)	0.71	
00	0.81	
0	1.21	6.50
00	1.62	
0	2.02	
0	3.03	6.07
00	5	. F.
000	60.0	2 6
	12 14	•
3		< -

DISABLED ADULT POPULATION IN INSTITUTION

POPULA

		6	6	•	4	7	0	ė.	7	Ġ	Ŗ,	24.94	÷ (;,	- c	, ,	6			16.86	16.33	15.85	15.40	14.99	14.00	12.64	12.05	11.54	٠	10.65	•	9.61	•	•	•	•	•	•	59. SI	4.26	3.20
ROP	?	0.29	•	•	•	1.29	1.43	1.57	1.71	•	•	•		•					•	•	•			5.71			•	•	•	10.71	•		•	-	17.14	÷	۶.	Ŗ,	8	42.84	57.12
TOTAL				30		53	50	55	09			75		2 -	10	120	130	140	150	160	170	000	0 6 6	225	250	275	300	325	250	A C C S	425	450	475	500	009	700	800	006	0	20	

DISABLED ADULT POPULATION IN INSTITUTION

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õ	· N	L)	ě	'n	0	9	-	•	٠.	•	2.	۲.	~	M	M	M	4.0	3.0	5.6	8.2		3.6	6.0	9.6	1.2	3.8	6.4	9.0	1.6	4.2	6.9	9.5	2.1	7.3	2.5	7.7	2.9	8.1	8	88.59	m	
TOTAL		s €															Ö	2	Ē	~		N	Ľη.	~	Ō	~	Ŋ.	~	0	Ν	EQ.	1	0	E)	Ö	Ň	ō	Š	ō	850		Ē

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Ö	`.\`	٠	-	m	'n	4	^	•	•	•	<u>`</u> •	•	- :		M	3	9.	€.	٥.	٣.	۳	7	9	4		•	- 1	•	•	•	ċ	٥.	m	7	~	9	0	3	æ	۲,	6.6	.5	3.2	4.8	6.5	9.	3.0	.3	9	9	2 . 7	99.28	
TOTAL		5	-	20	0 M	05	.	50	55	60													•	~	- αο		. 0	•	, ,	1 r	٠.	0	2	S	^	0	2	S	~	0	0	0	0	0	00	50	00	50	00	00	00	0009	

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DISABLED ADULT POPULATION IN INSTITUTION

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~	¢	ď.	ĸ)	•	•	^	æ	٠.	0	٨	M	ĸ	^:	•	0	٧	4	ĸ	^	۰	Ö	٧	•	9	3.77	٠	-	~	~	٣.	Ŋ	0	4	€.	N	` '	٠,	ņ	•	 •	, ,	יים חו	:	ر د د	4.2	2.8	٠. د د	68.52	
TOTAL		25	20	35	0,4	45	50	55	09	70	80	•	0	-	N	m	•	D.	9	•	€ .	•	0	•	220	M	•	S	~	0	~	S.	~	0	∾ 1	Λí	٠.	, LC	۵ (, c	2	2 6	50	0 6	20	ō	4000 6000	

DISABLED ADULT POPULATION IN INSTITUTION

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2	5	-	3	•	•	٠	٠	•	۲.	۲.	€.	٠.	0	٥.		٦.	~	3	ī.	۲.	€.	٥.	Ξ.	m	3.	۹.	۲.	٠.	۲.	€.	٠.	~	۲.	M	æ	5.5	9. S	5.5	.0	6.5	62.02	7.5	M
TOTAL		ċ	 _	0	_	~	2	•	LO.	0	S	0	S	0	~	LC.	0	90	00	0	20	30	60	50	9	7.0	80	90	00	50	00	0	00	0	00	00	900	000	000	000	40000	000	000

DISABLED ADULT POPULATION IN INSTITUTION

POPULATION ADULTE HANDICAPEE EN INSTITUTION

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PROP	$\bar{\mathbf{x}}$	٦.	~	~	7	3	3	'n	Ŋ	9	9	^	^	^	€.	0	0	-	~	M	3	r.	9.	۲.	8	•	٥.	M	•	٣.	9	Ξ.	۲,	۲.	ĸ	M.	M.	4.	5.6	0.8		7.7	2.1	9.2	73.05	7	93.93	
TOTAL		Ō	ō	ō	Ö	~	Ē	Ō	Ľ.	ō	Š	ō	C.	Ō	ō	0	ō	Ō	ō,	Ö	Ō	Ö	9	70	80	0	Õ	52	50	00	20	00	00	00	00	Õ	006	000	200	000	000	000	000	000	70000	000	000	

POPULATION ABULTE HANDICAPEE EN INSTITUTION

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PROP	_	N	· M	I		•	•	1.00	_	N	м	•	ĸ	9	۲.	é	•	•	Ň	ĸ	۲.	٥.	۲.	3.50	۲.	0	'n	0	٠.	٠.	٠.	٠.	9.9	2.4	4.9	6.6	•	6.	5 5	6.6	4.9	6.6	6.	6	6	6.6	94.91	99.91	
TOTAL		25	50	7.5	00	98	90	100	110	120	130	140	150	160	170	180	190	200	225	250	275	300	325	350	375	400	450	200	909	200	800	•	•	~	₽	0 1	n (> 1	1	•	S	0	0	0	0	0006	ĸ	0	

DISABLED ADULT POPULATION IN INSTITUTION

POPULATION ABULTE HANDICAPEE EN INSTITUTION

۲	2	5.5	2.0	7.0	8.3	6.3	4	. T	1.8	9.0	9 6	-0	7.8	7.0	6.2	5.5	+.+	2.8	1.7	0.7	6.0	9.2	8	7.9	м	40	M	•		₩^	•	•	0	_	М	M	۰	0	TU.	_	~	0	FU.	1.99	•	08.0	90.0
2	$\bar{\mathbf{x}}$	4	۲.	۲.	Θ.	•	٥.	٦.	۲.	M	3	ĸ	9.	۲.	•	٠.	۲.	M	•	€.	0	w	'n	8	٥.	۲	ŗ.	۲.	۲.	•	9.	ĸ.	9.5	4.2	0.	æ. æ.	8	M.	8.0	8.2	7.6	7.1	9.9	76.17	5.7	ĸ.	ō
TOTAL		50	7.5	80	06	100	110	120	₩^	.+	'n	•	~	a n	o.	0	N	LO.	^	0	~	TU.	~	0	~	LO.	~	0	0	0	0	6	00	20	00	9	00	50	0	N O	00	00	00	8000	0	10000	S

DISABLED ADULT POPULATION IN INSTITUTION

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APPENDIX I

Products and Publications from the Health and Activity Limitation Survey

Products and Publications from HALS

Available now....

Custom Data Service

The Health and Activity Limitation Survey can respond to special data requests at an approximate cost of \$200-\$300 per tabulation. An estimate of cost and delivery date is provided to the client before proceeding with production of the tabulation. Currently, turnaround time is approximately 8 weeks after confirmation of table specifications.

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.

Selected Data, for Canada, Provinces and Territories, (\$15.00), provides an overview of data from the survey.

Subprovincial/subterritorial profiles feature HALS data at a detailed geographic level. These profiles include 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.

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.

To be released in 1990

Publications

Highlights: Disabled Persons in Canada is a national counterpart to the subprovincial/subterritorial profiles released in April 1989. All data presented in the latter profiles are presented for Canada and province/territory levels in this publication; information for some topics will be expanded beyond that which was provided in the subprovincial/subterritorial profile series. The price for this report will be \$25.00; it is scheduled for release in March 1990, cat. #82-602.

Special Topic Reports - a series of eight 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. 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 will focus on the education, labour force characteristics and income of women with disabilities. This population will be compared to males with disabilities as well as to the non-disabled male and female populations.

Disability and Canada's Aboriginal Population

This report will answer basic questions on the nature and extent of disability among Canada's aboriginal population. Using selected data from HALS and the 1986 Census, the report will provide important background information on the special socio-economic conditions facing aboriginal persons with disabilities, both on and off-reserves.

Barriers Confronting Seniors with Disabilities in Canada

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

This report will document 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.

Blindness and Visual Impairment in Canada

This report will analyze HALS data for visually impaired persons residing in households by province, age of onset, gender, severity and cause. The analysis will compare 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.

Profile of the Canadian Population Residing in Health Care Institutions

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.

Leisure and Lifestyles of Persons with Disabilities in Canada

This report will analyze the recreation and lifestyles of persons with disabilities residing in households. It will highlight details of the frequency of participation in activities such as visiting friends, talking on the telephone, shopping, etc. as well as obstacles encountered during such participation. The report will also examine support services used and/or needed for everyday activities.

Microdata File

The third microdata file contains approximately 10,240 non-identifiable records of disabled children aged 0 to 14 years residing in households. Tabulations on this file are possible for Canada and the regions: Atlantic, Quebec, Ontario and West (including Yukon and the Northwest Territories). The cost of this microdata file, including full documentation, is \$1,000.