

GENERAL SOCIAL SURVEY

CYCLE SEVEN QUESTIONNAIRE PACKAGE

This package briefly describes the content, methodology and sample and the seventh cycle of the General Social Survey (GSS). Copies of the questionnaires used in Cycle 7 are attached as appendices: the Control Form (GSS 7-1) as Appendix A; and the 'Time Use Questionnaire' (GSS 7-2) as Appendix B. The daily activity list can be found in Appendix C.

Two questionnaires are used to conduct the interviews:

QUESTIONNAIRE	AGE GROUP	TITLE
GSS 7-1	All age groups	Control Form
GSS 7-2	Age 15 and over	Time Use Questionnaire

The GSS 7-1 is completed for each telephone number selected in the sample. It lists all household members and collects basic demographic information, specifically, age, sex, marital status and relation to the household reference person. A respondent, 15 years of age or older, is then randomly selected and a GSS 7-2 is completed for this person.

The seventh cycle of the GSS marks the first repeat of the GSS core subject on Time Use (Cycle 2, 1986). Data collection for this cycle will be monthly from January 1992 to December 1992.

The content of the main questionnaire includes:

Section of	GSS	7-2	
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Content

A. B.	General Questions Time Use Diary
С.	Questions about the Designated Day
D.	Paid and Unpaid Help
Е.	Perceptions of Time
F.	Educational, Cultural and Recreational
	Activities
G.	Organized Sport
Н.	Respondent's Main Activity
J.	Spouse's Main Activity
К.	Classification
Μ.	Contacts for Follow-up
N.	Interviewer Check Items

Sample

The Cycle 7 sample includes persons 15 years of age or older selected from the ten provinces. The sample is selected through random digit dialing (RDD).

Each computer generated telephone number in the sample is called and an interviewer completes a Control Form. When a private household is contacted, all the members of the household are enumerated and then one member age 15 or over is randomly selected and interviewed. No proxy responses to the 7-2 questionnaire are accepted.

The expected sample size for Cycle 7 is 10,000.

April 1992

APPENDIX A

GSS CONTROL FORM 7-1

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21.	Helio, I'm from Statistics Canada. I'm calling you for a study on the way Canadians spend their time.	appek	ons con	de Statistique Canada. cernant une étude sur la fa lisent leur temps.		
22.	I'd like to make sure that I've dialed the right number. Is this (read number)?	numé	ro. S'agi	'assurer que j'ai compo t-li du nº (lire le numéro):		bon
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	No ○ ► Dial again, if still wrong, END	Non .		Composez de s'agit encore o numéro, METT	t'un ma	auvais
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Ì	an interview. What is the first name and age of each person living or staying there who has no usual place	une ir	nterview	. Quel est le prénom et l'âc vit ou demeure à cet endi	je de ci	haque
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	each person recorded in item Z3.			pour chaque personne rubrique Z3.		
	Refer to Interviewer Reference Card for instructions and codes.			Pour les instructions voir la Fiche de l l'intervieweur.		
	Then go to item 29.			Puis, passez à la rubr	iaue 29).
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If the last call to the household is recorded on this page, transcribe the information for this call to line 99 on page 1.

Si le dernier appel effectué pour ce ménage est enregistré sur cette page, veuillez transcrire l'information relative à cet appel à la ligne 99 de la page 1.

APPENDIX B

GSS 7-2 Time Use Questionnaire

(C7_MAIN.009)

Housing Family and Social Statistics Division General Social Survey Time Use Questionnaire Ages 15 Years and over

GSS 7-2

Confidential when completed

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

Telephone Number

Label Identification Number

Page-line Number

1 Type

Name of Interviewer

8-4500-63.1

Section A: General Questions

Start Time :

A2. INTERVIEWER:

Repeat the introduction below if the selected respondent is different from household respondent.

Hello, I'm.... from Statistics Canada. I'm calling you for a study on the way Canadians spend their time.

All the information we provide in this voluntary survey will be kept strictly confidential. Your participation is essential if the survey results are to be accurate.

A3. I will start with a few general questions related to time.

A4. How often do you feel rushed? Would you say it is....

every day?

a few times a week? about once a week? about once a month?

less than once a month?

Never?

A5. Compared to five years ago, do you feel more rushed, about the same or less rushed?

More rushed About the same

Less rushed

A6. How often do you feel you have time on your hands that you don't know what to do with? Would you say it is....

every day? a few times a week? about once a week? about once a month? Less than once a month? Never?

Section B: Time Use Diary

B1. Interviewer - "X" day to which activities refer

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

The best way to collect accurate information on the way people use their time is to complete a diary listing all of their activities over a 24-hour period. We start our diary at 4:00 in the morning because most of the people are asleep at that time.

(Optional):

Let me give you an example: (read only the example that is most appropriate for this household)

EXAMPLE 1: (Family with children)

Yesterday morning I was asleep until 7:15. From 7:15 to 7:30 I got dressed. Then from 7:30 to 7:45 I made breakfast. Then I ate breakfast with my husband and children until 8:10.

EXAMPLE 2: (Person living alone)
Yesterday morning I was asleep until 8:30. From 8:30 to 8:40 I had a shower and
got dressed. Then from 8:40 until 8:55, I made breakfast.

EXAMPLE 3: (Spouse with no children)
Yesterday morning I was asleep until 6:00. From 6:00 to 6:15 I got dressed. Then
from 6:15 until 6:25 I made breakfast. From 6:25 to 6:35 I ate breakfast with my
spouse.

Do	not	ask	question	"e"	about	sleep,	sex	or	other	personal	care	activities.	
----	-----	-----	----------	-----	-------	--------	-----	----	-------	----------	------	-------------	--

B2. Let's begin.

1 (a) On (designated day), at 4:00 a.m. what were you doing?

(Interviewer: If the respondent's activity was sleep, then ask: What time did you fall asleep? ___: ___:

* Not Applicable

(b) Time

04:00

(c) When did this end?

__ : __ _

___ ___

(d) Where were you?

- respondent's home
- work place
- someone else's home
- other place

OR IN TRANSIT:

- car (driver)
- car (passenger)
- walk
- bus & subway
- bicycle
- other

(e) Who was with you?

- alone
- spouse/partner
- child(ren) of the household
- other family members
- friend(s)
- other person(s)

2	(a)	And then, what did you do next?
	(b)	When did this start?
	(C)	When did this end?
	(d)	<pre>Where were you?/Were you still - respondent's home - work place - someone else's home - other place OR IN TRANSIT: - car (driver) - car (passenger) - walk - bus & subway - bicycle - other</pre>
	(e)	Who was with you?/Were you still
		 alone spouse/partner child(ren) of the household other family members friend(s) other person(s)

(In last area before Section C)

INTERVIEWER:

Number of episodes

To record additional activities, use another GSS 7-2, transcribe telephone label information on front of form and indicate the number of 7-2 forms used.

Number of forms

Section	C:	Questions	about	the	Designated	Day

C1.	Of the activities that you just reported, which one did you enjoy the most?									
	(record the epis	ode number from B2)								
	None									
	All (INTERVIEWER: Pr enjoyable	obe the respondent for the most activity)								
	(record th	e episode number from B2)								
C2.	INTERVIEWER CHECK ITEM									
	Does the respondent have a child(ren) less than 15 years old living in the household? (<i>Review 25 of GSS</i> 7-1)									
	Yes									
	No F Go T	o Dl								
	Refused F Go T	o D1								
C3.	I'd like to quickly go back after your children.	over your day and find out when you were looking								
	which is often missed by the	activity that places many demands on our time, but kind of diary we've just completed because we often e time such as preparing meals or watching TV.								
C4.		wake up on (designated day) ? e of the child who woke up first.)								
	When did your child/children	go to sleep on (designated day)?								
	(INIERVIEWER, RECORD LHE LIM	e of the child who went to sleep last.)								

C6. On (designated day), at what times were you looking after your child/children?

	Start	End
1)	:	:
2)	:	:
3)	:	::
4)	:	::
5)	:	:
6)	:	:
7)	:	::
8)	:	:
9)	:	:
10)	:	:

Section D: Paid and Unpaid Help

D1.	INTERVIEWER CHECK ITEM
	Is there anyone less than 15 years old living in the household? (Review Z5 of GSS 7-1)
	Yes
	No Go To D3
	Refused F Go To D3
D2.	Last week, how many hours did you spend looking after children who live in your household?
	4 hours
D3.	Last week, did you spend any time doing housework including cooking, cleaning, grocery shopping and laundry for your household?
	Yes b D3A. For how many hours? 7 hours
D4.	No Last week, did you do any unpaid work to maintain or improve your house, yard or automobile?
D4.	
	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? 9 hours No
	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? 9 hours
	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? 9 hours No Do you pay anyone, on a regular basis, to help out with cleaning your house?
	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? 9 hours No Do you pay anyone, on a regular basis, to help out with cleaning your house? Yes
D5.	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? Do you pay anyone, on a regular basis, to help out with cleaning your house? Yes No Go to D7
D5.	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? 9 hours No Do you pay anyone, on a regular basis, to help out with cleaning your house? Yes No Go to D7 Refused Go To D7
D5.	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes D4A. For how many hours? 9 hours No Do you pay anyone, on a regular basis, to help out with cleaning your house? Yes No Go to D7 Refused Go To D7 How often do you use this service?
D4.	Last week, did you do any unpaid work to maintain or improve your house, yard or automobile? Yes ▶ D4A. For how many hours? 9 hours No 9 hours Do you pay anyone, on a regular basis, to help out with cleaning your house? Yes No ▶ Go to D7 Refused ▶ Go To D7 How often do you use this service? Every day
D5.	Last week, did you do any unpaid work to maintain or improve your house, yard or Yes No Do you pay anyone, on a regular basis, to help out with cleaning your house? Yes No Go to D7 Refused Go To D7 How often do you use this service? Every day Every week

D7. Now let's talk about unpaid help you may have given to friends, neighbours or relatives who did not live with you.

D8	. Last month,				
		No	Yes	► D8A.	For how many hours? (last month)
a)	Did you help someone else with housework, including cooking, cleaning, grocery shopping and laundry?			►	1 hours
b)	Did you help someone else with repairs or maintenance on a house, yard or automobile?			►	2 hours
C)	Did you look after another person's child?			►	3 hours

D9. Now, I would like to ask about other types of unpaid help that you gave to organizations or persons including to other household members.

D1(). Last month,		No	Yes	▶ D10A	A. For how many hours?
a)	Did you help someone else with transportation, shopping or getting around outdoors?				►	4 hours
b)	Did you provide personal care to someone who was disabled or ill?				►	5 hours
с)	Did you help anyone to write letters, solve problems, find information or fill out for	ms?				6 hours
d)	Did you help anyone with carrying on a business or with farming?				►	7 hours
D1:	L. Last month,	No	Yes		D11A.	For how many hours?
a)	Did you do any volunteer work that I have not mentioned so far for an organization?			►	8] hours
b)	Did you help anyone in a way that I have not mentioned so far?			►	9] hours

Section E: Perceptions of Time

E1. Now I would like to ask you some questions on your outlook towards your use of time.

E2.				
a)	Do you plan to slow down in the coming year?	Yes	No	Don't know
b)	Do you consider yourself a workaholic?	Yes	No	Don't know
с)	When you need more time, do you tend to cut back on your sleep?	Yes	No	Don't know
d)	At the end of the day, do you often feel that you have not accomplished what you had set out to do?	Yes	No	Don't know
e)	Do you worry that you don't spend enough time with your family or friends?	Yes	No	Don't know
f)	Do you feel that you're constantly under stress trying to accomplish more than you can handle?	Yes	No	Don't know
g)	Do you feel trapped in a daily routine?	Yes	No	Don't know
h)	Do you feel that you just don't have time for fun any more?	Yes	No	Don't know
i)	Do you often feel under stress when you don't have enough time?	Yes	No	Don't know
j)	Would you like to spend more time alone?	Yes	No	Don't know

Sect	ion F: Educational,	Cultural and	Recreati	onal A	ctivitie	5		
F1.	Last month, did y	ou attend any	courses	or tra	ining sea	ssions?		
	Yes							
	No 🕨 Go to	> F3						
F2.	Were these course		es					
	a) Credit courses	;?	_ ► F	'2A. F	for how m a	any hours: •	? (las _ hour	
	Non-credit course	es?	— ► F	'2B. F	For how ma	any hours: •	? (las _ hour	
F3.	Now, I would like	to ask you ab	out your	leisu	re activ	ities.		
F4.	During the past 1 (not for work or							
	a) newspaper?	No Yes 🕨	F4A. Was the		during month?			
				No Ye	es 🕨	F4B. Was the		during week?
						No	Yes	
	b) magazine?	No Yes 🕨		No Ye	es 🕨	No	Yes	
	c) book?	No Yes 🕨		No Ye	es 🕨	No	Yes	
	INTERVIEWER:	If No or Refu	sed 🕨	Go to	F6			
F5.	Was the last book	: you read fict	ion or n	on-fic	tion?			
	Fiction 🕨	F5A. Was it a novel poetry a play other	a novel, Go to		ry, a pla	y or somet	ching	else?
	Non-fiction		a biograj thing el		n autobiog	graphy, hi	story.	, self-help
		a biography o history self-help other	or autobi	.ograph	цу			

F6.	Dui	ring the p											
	a)		book from for self o: ?		Yes	► F6			s during t month?				
								No	Yes 🕨	F6B.			during week?
												No	Yes
	b)		o records, s or CDs?	No	Yes	►		No	Yes			No	Yes
	C)		ilm, rente r videodis or at a			ased,							
		friend's		No	Yes	►		No	Yes			No	Yes
F7.		ofessiona		such type it .	as fo: of mu	lk, roo	ck or j	azz co	oncerts?	sical	. per	forma	ince by
F7.	pro	ofessiona	l artists : F7A. What	such type it .	as fo: of mu	lk, roo usical F7B. W	ck or j	azz co mance: .s duri	oncerts?	sical	. per	forma	nce by
F7.	pro	ofessiona	l artists a F7A. What Was i) pop/roo	such type it . ck mu	as fo: of mu	lk, roo usical F7B. W	k or j perfor Nas thi	azz co mance: .s duri	oncerts?	. Was	this	forma s dur: z weel	ing
F7.	pro	ofessiona	l artists a F7A. What Was i) pop/roo	such type it . ck mu	as fo: of mu	lk, roo usical F7B. W	k or j perfor Nas thi the pas	azz co mance: .s duri st mont	oncerts?	. Was	this	s dur:	ing
F7.	pro	ofessiona	l artists a F7A. What Was i) pop/roo	such f type it . ck mu Yes	as fo of mu sic?	lk, roo usical F7B. W	k or j perfor Nas thi the pas	azz co mance: .s duri st mont	oncerts?	. Was	this	s dur: z weel	ing
F7.	pro	ofessiona	<pre>I artists : F7A. What Was i) pop/roo No ii) jazz/l</pre>	such f type it . ck mu Yes blues	as fo of mu sic?	lk, roo usical F7B. V t	k or j perfor Nas thi the pas	azz co mance: .s duri st mont	ing ch? F7C	. Was the	this	s dur: z weel	ing
F7.	pro	ofessiona	<pre>I artists : F7A. What Was i) pop/roo No ii) jazz/l</pre>	such f type it . ck mu Yes blues	as fo: of mu sic? >	lk, roo usical F7B. V t	k or j perfor Was thi the pas No	azz co mance: .s duri st mont	ing ch? F7C	. Was the	this past No	s dur: z weel	ing
F7.	pro	ofessiona	l artists a F7A. What Was i) pop/roo No iii) jazz/l No iii) folk	such f type it . ck mu Yes blues	as fo: of mu sic? >	lk, rod usical F7B. V t	k or j perfor Was thi the pas No	azz co mance: .s duri st mont	oncerts? ? ing th? F7C	. Was the	this past No	s dur: z weel	ing
F7.	pro	ofessiona	l artists a F7A. What Was i) pop/roo No iii) jazz/l No iii) folk	such f type it . ck mu Yes blues Yes musi Yes	as fo: of mu sic? ? C?	lk, roo usical F7B. V t	ves	azz co mance: .s duri st mont	oncerts? ? ing th? F7C	. Was the	this past No es	s dur: z weel	ing
F7.	pro	ofessiona	I artists a F7A. What Was i) pop/roo No iii) jazz/I No iii) jazz/I No iii) folk No iv) count:	such f type it . ck mu Yes blues Yes musi Yes	as fo: of mu sic? ? C?	lk, rod usical F7B. V t No No	ves	azz co mance: .s duri st mont	oncerts? ? ing th? F7C	• Was the	this past No es	s dur: z weel	ing

During the past 12 months did you attend a concert or performance by professional F8. artists such as music, dance, theatre or opera?

Yes		
No	►	Go to F12
Refused	►	Go to F12

F9.	Did you at	tend a dance performance?
	Yes 🕨	F9A. Was it
		i) ballet?
		No Yes F9B. Was this during the past month?
		No Yes F9C. Was this during the past week?
		No Yes
		ii) contemporary dance?
		No Yes 🕨 No Yes 🕨 No Yes
	No	
F10.	Did you at	tend a symphonic or classical musical performance?
	Yes 🕨	F10A. Was it
		i) symphonic music?
		No Yes F10B. Was this during the past month?
		No Yes F10C. Was this during the past week?
		No Yes
		ii) symphonic "pops" concerts?
		No Yes No Yes No Yes
		iii) contemporary classical music?
		No Yes No Yes No Yes
		iv) chamber music and classical soloists?
		No Yes 🕨 No Yes 🕨 No Yes
		v) opera?
		No Yes 🕨 No Yes 🕨 No Yes
		vi) choral music?
	No	No Yes 🕨 No Yes 🅨 No Yes

	Yes	►	F11		What Was i		of t	heat	rica	l pe	rfoi	rmanc	e?			
			i)	dra	ma?											
				No	Yes		F11B		as ti he pa							
									No	Yes	►	F11		s this e past		
													No	Yes		
			ii)	cc	medy?	,										
				No	Yes				No	Yes	►		No	Yes		
			iii) a	vant-	gard	le the	atre	?							
				No	Yes				No	Yes			No	Yes		
			iv)	a	music	al?										
				No	Yes				No	Yes			No	Yes		
			v)	sta	ind-up	con	nedy?									
				No	Yes				No	Yes			No	Yes		
F12.	Duri	ng the j	past	12	mont	hs d	lid yo	u at	tend	any	• • •	•				
	a) po cl	erforman hildren	nce 's m	of usi	с,	No	Yes		F12A	•	Was	this past		-		
	b	heatre a y profes rtists?									No	Yes	►	F12B.		nis during past week?
															No	Yes
		erforman thnic an			tage											
		ance/mus			Jugo	No	Yes	►				No	Yes	►	No	Yes
F13.	Duri	ng the j	past	12	mont	hs d	lid yo	u at	tend	any	pro	ofess	ional	sport	ing ev	ent?
		No Ye	es		►	F13	A. Wa	s th e pa			-					
								No	Yes	►		F13B		this past		
														No Ye	s	

F14.	During the past 12 months di	d you	go to a	movie (at	a commerc	ial theatre)?
			his duri ast mont			
		No	Yes	► F14B.	Was this the past	
					No Y	es
F15.	During the past 12 months di	d you	go to a	museum or	an art ga	llery?
	Yes					
	No 🕨 Go to F17					
	Refused F Go to F17					
F16.	Did you go to					
	a) a public art gallery or art museum?					
			is durin st month			
		No	Yes	► F1		his during ast week?
					No	Yes
	b) a commercial art gallery?	,				
	No Yes	No	Yes	►	No	Yes
	c) a science centre or scien and technology museum?	ce				
	No Yes 🕨	No	Yes	►	No	Yes
	d) a natural history or natural science museum?					
	No Yes	No	Yes		No	Yes
	e) a general or a human history museum?					
	No Yes 🕨	No	Yes		No	Yes
	f) a community museum?					
	No Yes 🕨	No	Yes		No	Yes

F17.	Du	ring th	e past	: 12 n	onths d	id you	go to	5 a(n)	••••			
	a)	archae	ologia	cal si	.te?							
		No	Yes		F17A.		his du ast mo					
						No	Yes		F17B.		his durin ast week?	g
										No	Yes	
	b)	histor	ic sit	e?								
		No	Yes		►	No	Yes			No	Yes	
	b)	zoo, a garden observ	, plar		tanical .um or							
		No	Yes			No	Yes			No	Yes	
	d)	conser	vatio	n area	or nat	ure pa	rk?					
		No	Yes			No	Yes			No	Yes	
F18.		ring th festiv or exh	als, f	airs	onths d	id go	to any	¥ •••				
		No	Yes		F18A. W	as thi the pa						
						No	Yes		F18B.		is during ast week?	
										No	Yes	
	b)	other perfor a circ	mance	such								
		No	Yes	►	-	No	Yes	I		No	Yes	

F19.	During the past 12 months did you												
	a)	a) do any individual art activities such as painting or sculpturing?											
			No	Yes	►	F19A.	Was this during the past month?						
							No	Yes		F19B.		nis during ast week?	
											No	Yes	
	b)	woo	dca	rving,	s such knitt ellery								
			No	Yes	►		No	Yes		►	No	Yes	
	c)				tise a rument	?							
			No	Yes	►		No	Yes		•	No	Yes	
	d)	_	-	in ar raphy?	tistic								
			No	Yes	►		No	Yes		•	No	Yes	
F20.					12 mo r stud		you tak	e any	course	s or le	ssons i	for pleasure	
	Ye	S											
	No			►	Go	to F22							
	Re	fuse	ed	►	Go	to F22							

F21.	What	type	e of	courses	\mathbf{or}	lessons	were	these?
	(Mark	all	that	apply.)			

	F21A.			is duri st mont	-			
	a) music		No	Yes		F21B.		during week?
							No	Yes
b)	singing		No	Yes			No	Yes
c)	ballet or other dance		No	Yes			No	Yes
d)	fine arts		No	Yes			No	Yes
e)	crafts	►	No	Yes			 No	Yes
f)	acting or other theatre activities		No	Yes			 No	Yes
g)	writing		No	Yes			 No	Yes
h)	television, radio broadcasting or recording		No	Yes			No	Yes
i)	photography		No	Yes			 No	Yes
j)	other		No	Yes			 No	Yes
	(Specify)							
k)	other		No	Yes			 No	Yes
	(Specify)							
1)	other	►	No	Yes			 No	Yes
	(Specify)							

F22. How many hours did you watch CBC (Radio Canada) television last week? Was it ...

None at all? 1 to 2 hours? 3 to 4 hours? 5 to 9 hours? 10 or more hours? Don't know F23. How many hours did you listen to CBC radio last week? Was it ... None at all? 1 to 2 hours? 3 to 4 hours? 5 to 9 hours? 10 or more hours? Don't know

Section G: Organized Sport

G1.			-	regularly participate l, bowling or skiing?	
	Yes				
	No	Go to G4			
	Refused	Go to G6			
G2.	Which sports do		ate in G2A.	N? Was this organized through a club, a community recreation program, a league or a provincial sport organization?	Did you participate in a competition and/or tournament in the past 12 months?

(Sport code)

 	Yes	No	Yes	No
 	Yes	No	Yes	No
 	Yes	No	Yes	No
 	Yes	No	Yes	No
 	Yes	No	Yes	No

G3. INTERVIEWER: Go to G6

G4. Are there any particular reasons why you did not participate regularly in any sports?

Yes	
No	

No	Go	to	G6
Refused	Go	to	G6

G5.	What are they? (mark all that apply)							
	Programs are not available in the community							
	Programs are not available for women							
	Not interested							
	Have not got time							
	Do not want to be committed to regular schedule							
	Facilities are not available							
	Too expensive							
	No one ever invited me to participate							
	Health							
	Age							
	Disability							
	Other Specify							
G6.	INTERVIEWER CHECK ITEM							
	Is this a single-person household? (Review Z3 of GSS 7-1)							
	Yes 🕨 Go to G9							
	No							
	Refused F Go to G9							
G7.	During the past 12 months, did anyone else in your household participate regularly in any sports?							
	Yes							
	No F Go to G9							
	Refused							
G8.	Which members participate?							
	G8A. For which sports?							
Page	e-line (Sport code)	(Sport code)						
	>							
	→ →							
	→ ▶							

___ __ __

- ----

▶ -

G9.	Do you be organizati	-	a spor	t club	or a	local,	provincial	or nation	al sport
	Yes								
	No								
G10.	During the in amateur	-		-	ı or any	y member	of your hou	sehold been	involved
			No Ye	s 🕨	G102	A. Which	members of	your househ	old?
a) co	ach?		►				(Page -line) 		(Page -line)

_

_ _

- G11. When you were/are at school, did/do you ever participate in organized school sport, other than in physical education classes?

G12.	Were you eve	er invo	olved in competition between schools?	
	Refused	►	Go to H1	
	No		Go to H1	
	Yes			

Yes

b) referee or umpire?

No

Section H: Respondent's Main Activity

Н1.	Last week, was your main activity worki going to school, keeping house, retired (Note: If sickness or short-term il) activity)	d or some	thing else?									
	Working at a job or business	►	Go to H13									
	Vacation (from paid work)		Go to H13									
	Looking for work	►	Go to H3									
	Going to school											
	Keeping house	►	Go to H3									
	Retired		Go to H3									
	Something else:	Go to H3										
	Maternity/paternity leave		Go to H3									
	Long term illness		Go to H3									
	Other	►	Go to H3									
	(Specify)											
	Refused											
Н2.	Were you studying full-time or part-ti Full-time Part-time											
Η3.	Did you have a job or were you self-employed at any time last week?											
	Yes 🕨 Go to H13											
	No											
Н4.	Did you have a job or were you self-employed at any time during the past 12 months?											
	Yes 🕨 Go to H7											
	No											
	Refused											
н5.	In what year did you last do any paid	work?										
	19											
	Never worked at a paid job											

Н6.	INTERVIEWER: Go to Section J1.
Н7.	For how many weeks during the past 12 months were you employed? (Include vacation, illness, strikes, lock-outs and maternity/paternity leave.)
	weeks
Н8.	For whom did you work the longest time during the past 12 months? (Name of business, government department or agency, or person)
Н9.	What kind of business, industry or service was this? (Give full description: e.g. federal government, canning industry, forestry services)
н10.	What kind of work were you doing? (Give full description: e.g. office clerk, factory worker, forestry technician)
н11.	In that work, what were your most important activities or duties? (Give full description: e.g. filing documents, drying vegetables, forestry examiner)
H12.	INTERVIEWER: Go to Section J1.

н13.	For how many weeks during the past 12 months were you employed? (Include vacation, illness, strikes, lock-outs and maternity/paternity leave.
	weeks
н14.	Were you a paid worker or self-employed?
	Paid worker Go to H17
	Self-employed
	Other Go to H17
	Refused Go to H17
н15.	Did you have any paid employees?
	Yes
	No 🕨 Go to H18
	Refused > Go to H18
н16.	About how many employees did you have? (if range given, enter maximum) employees Go to H18
н17.	For whom did you work last week? (Name of business, government department or agency, or person)
н18.	<pre>What kind of business, industry or service was this? (Give full description: e.g. federal government, canning industry, forestr services)</pre>
н19.	What kind of work were you doing? (Give full description: e.g. office clerk, factory worker, forestry technician

н20.	<pre>In that work, what were your most important activities or duties? (Give full description: e.g. filing documents, drying vegetables, forestry examiner)</pre>
н21.	Are you a union member or covered by a union contract or collective agreement in this job?
	Yes
	No
Н22.	Did you have more than one paid job last week?
	Yes
	No
Н23.	How many hours a week do you usually work at your
	(main) job? 5 hours
	other jobs? 6
	(Only if H22 = Yes.)
Н24.	INTERVIEWER: Is total in H23 30 or more hours?
	Yes 🕨 Go to H26
	No
	Refused 🕨 Go to H26
Н25.	Why do you usually work less than 30 hours a week? (Mark all that apply)
------	--
	Own illness or disability
	Child care responsibilities
	Elderly care responsibilities
	Other personal or family responsibilities
	Going to school
	Could only find part-time work
	Did not want full-time work
	Full-time work under 30 hours per week
	Other:
	(Specify)
Н26.	Which of the following best describes the hours you usually work at this job? (For respondent's main job.)

A regular daytime schedule or shift?

A regular evening shift?

A regular night shift?

A rotating shift? (one that changes periodically from days to evenings to/or nights)

(one consisting of two or more A split shift? distinct periods each day)

Other?

(Specify) ►

H27. Do you have a flexible schedule that allows you to choose the time you begin and end your work day?

Yes

No

Don't know

H28. Excluding overtime, do you usually work any of your scheduled hours at home?

Yes

No

H29. Do you Yes No	
a) have a compressed work week?	
b) do on call work?	

Section J: Spouse's Main Activity

J1.	INTERVIEWER	R CHECK	ITEM					
	Is the res <u>r</u> (Review Z7			ng with	his/her	spouse	or	partner?
	Yes							
	No		Go to	5 K1				
	Refused		Go to	5 K1				

	st week, was your spouse's/par siness, looking for work, going to se?		-	-	-
(No	ote: If sickness or short-term civity)	illness is	s reported, a	ask for usu	al major
Wor	cking at a job or business		Go to J5		
Vac	cation (from self-employment or paid work)	►	Go to J4		
Loc	oking for work		Go to J4		
Goi	ing to school				
Kee	eping house		Go to J4		
Ret	zired		Go to J4		
Som	mething else:				
	Maternity/paternity leave	►	Go to J4		
	Long term illness		Go to J4		
	Other		Go to J4		
	(Specify)				
Ref	Eused		Go to J4		

J3. Was he/she studying full-time or part-time?

Ful	1-	tj	.me

 J4.
 Did he/she have a job or were they self-employed at any time last week?

 Yes
 Yes

 No
 ►
 Go to J8

 Refused
 ►
 Go to J8

J5.	How many hours di	d he/she work? (Include all jobs)					
J6.		n (designated day)?					
	Yes						
	No	Go to J8					
	Refused	Go to J8					
J7.	What hours did he	/she work?					
	Start time	1:					
	Finish time	2:					
	If he/she works a	split shift:					
	2nd Start time	3:					
	2nd Finish time	4:					
J8.		she spend any time doing housework including cooking, cleaning, and laundry for your household?					
	Yes	J8A. For how many hours?					
	No						
J9.	Last week, did he or automobile?	she do any unpaid work to maintain or improve your house, yard					
	Yes	J9A. For how many hours? 6 hours					
	No						
J10.	INTERVIEWER CHECK	ITEM					
	Is there anyone less than 15 years old living in the household? (<i>Review Z5 of GSS</i> 7-1)						
	Yes						
	No	Go To J12					
	Refused	Go To J12					

J11. Last week, how many hours did he/she spend looking after children who live in your household?

____. hours

```
J12. What is the highest level of education that he/she has attained?
     Masters (M.A., M.Sc., M.Ed.) or earned doctorate
            (Ph.D., D.Sc., D.Ed.)
      Degree in Medicine, Dentistry, Veterinary Medicine, or
            Optometry (M.D., D.D.S., D.M.D., D.V.M., D.D.)
      Bachelor or undergraduate degree, or teacher's college
            (e.g. B.A., B.Sc., B.A.Sc., LL.B)
      Diploma or certificate from community college, CEGEP or
           nursing school
      Diploma or certificate from trade, technical or vocational
            school, or business college
      Some university
      Some community college, CEGEP or nursing school
      Some trade, technical or vocational school,
          or business college
     High School diploma
      Some High School
     Elementary School diploma
      Some Elementary
     No schooling
      Other
            (Specify)
```

Section	ĸ:	Classification

К1.	Now a few general questions.
к2.	Is this dwelling owned by a member of this household?
	Yes
	No
к3.	What is your postal code (for this residence)?
	Don't know
к4.	Do you have more than one telephone in your home?
	Yes
	No 🕨 Go to K10
к5.	Do all the telephones have the same number?
	Yes 🕨 Go to K10
	No
Кб.	Households with more than one telephone number have a greater chance of being selected by the survey. We ask these questions to adjust for this.
к7.	How many different numbers are there?
к8.	Are any of these numbers for business use only?
	Yes
	No F Go to K10
к9.	How many are for business use only?
	Business numbers

K10. In what country were you born?

Canada **b** In which province or territory? Newfoundland/Labrador Prince Edward Island Nova Scotia New Brunswick Quebec Ontario Manitoba Go to K12 Saskatchewan Alberta British Columbia Yukon Territory Northwest Territories Country outside Canada China England France Germany Haiti Holland India Ireland Italy Jamaica Philippines Poland Portugal Scotland United States USSR Other (Specify) Refused Go to K12 In what year did you first immigrate to Canada? K11. 1 Canadian citizen by birth K12. What is your date of birth? 1 Day Month Year Refused

- K13. What language did you first speak in childhood? (Accept multiple responses only if languages were used equally) K13A. Do you still understand that/those language(s)? No Yes English French Italian German Ukrainian Dutch Chinese Hungarian Portuguese Polish Other (Specify) K14. What language do you speak most often at home? (Accept multiple responses only if languages are spoken equally) English French Italian German Ukrainian Dutch Chinese Hungarian Portuguese Polish Other (Specify) K15. Excluding kindergarten, how many years of elementary and high school education have you successfully completed? No schooling Go to K19 One to five years Six Go to K17 Seven Eight Nine Ten Eleven Twelve
- K16. Have you graduated from high school?
 - Yes

Thirteen

No

К17.	Have you had any further schooling beyond elementary/high school?
	Yes
	No 🕨 Go to K19
K18.	What is the highest level of education that you have attained?
	Masters (M.A., M.Sc.,M.Ed.) or earned doctorate (Ph.D., D.Sc., D.Ed.)
	Degree in Medicine, Dentistry, Veterinary Medicine, or Optometry (M.D., D.D.S., D.M.D., D.V.M., D.D.)
	Bachelor or undergraduate degree, or teacher's college (e.g. B.A., B.Sc., B.A.Sc., LL.B)
	Diploma or certificate from community college, CEGEP or nursing school
	Diploma or certificate from trade, technical or vocational school, or business college
	Some university
	Some community college, CEGEP or nursing school
	Some trade, technical or vocational school, or business college
	Other
	(Specify)
K19.	What, if any, is your religion?

No religion 🕨 🕨	Go to K21	
Roman Catholic United Church Anglican Presbyterian Lutheran Baptist Eastern Orthodox Jewish Islam (Muslim) Buddhist Hindu Sikh Jehovah's Witnesses Other (Specify)		
Refused	Go to K21	

K20. Other than on special occasions, (such as weddings, funerals or baptisms) how often did you attend religious services or meetings in the last 12 months? Was it ...

At least once a week? At least once a month? A few times a year? At least once a year? Not at all?

K21. Compared to other people your age, how would you describe your state of health? Would you say it was

Excellent?
Very Good?
Good?
Fair?
Poor?

K22. Are you limited in the amount or kind of activity you can do at home, at work or at school because of a long-term physical condition or health problem?

v	۵	C
т	C	Ð

No	►	Go	to	К24
Refused	►	Go	to	К24

K23. What is the main condition or health problem that limits you?

K24. Do you regularly have trouble going to sleep or staying asleep?

Yes

No

```
K25. In what country was your mother born?
```

```
Canada
```

Country outside Canada

```
China
England
France
Germany
Haiti
Holland
India
Ireland
Italy
Jamaica
Philippines
Poland
Portugal
Scotland
United States
USSR
Other
      (Specify)
```

Don't Know

K26. In what country was your father born?

Canada

Country outside Canada

	China
	England
	France
	Germany
	Haiti
	Holland
	India
	Ireland
	Italy
	Jamaica
	Philippines
	Poland
	Portugal
	Scotland
	United States
	USSR
	Other
	(Specify)
1+	Know

Don't Know

K27. Various measures of income are needed to study the relationship between an individual's overall economic situation and their use of time.

INTERVIEWER CHECK ITEM				
Review H14				
If H14 = Paid worker	Go to K29			
If H14 = Self-employed	Go to K30			
If H14 = Other	Go to K29			
If H14 is blank	Go To K30			
Refused ►	Go to K30			
	Review H14 If H14 = Paid worker If H14 = Self-employed If H14 = Other If H14 is blank			

K29. At your (main) job, what is your usual wage or salary before taxes and other deductions?

\$
Hourly
Daily
Weekly
Every two weeks
Twice a month
Monthly
Yearly
Other
(Specify)

K30. What is your best estimate of your own income before deductions from all sources during the past 12 months? Was your income



K31.	INTERVIEWER	CHECK ITEN	[:						
	Is this a s: (Review Z3 d			ehold?					
	Yes	► Go t	o Ml						
	No								
	Refused								
к32.	Not includin from any sou					e in your	household	received	income
		People	.g ciic	past 12	montins :				
кзз.		People		past iz					
 K33.		People CHECK ITEN	[:	past 12					
кзз.	INTERVIEWER	People CHECK ITEN Is K32=003	[:	past 12					
K33.	INTERVIEWER Review K32:	People CHECK ITEN Is K32=003	[:	past 12					

K34. What is your best estimate of the total income of all household members from all sources during the past 12 months? Was the total household income ...



Read the following section for each person interviewed.

This survey is part of a longer-term project to investigate the relationship between time use and other social issues. For this reason, we may need to contact your household in a year or more from now.

In case you move or change phone numbers, we would like to obtain your complete name and address. This information will be kept strictly confidential and will only be used to maintain contact with you.

Refused	to	provide info	orma	ation		Go	to	N1
Refused	to	participate	in	future	surveys	Go	to	N1

M2. Name of Respondent

	Given Name 🕨		 		
	Surname 🕨 ———		 	 	
М3.	Address of Respondent				
	Street and Number/ Lot and Concession	►			-
	City, Town, Village Municipality	►	 	 	-
	Province, Territory		 	 	-
	Postal Code	►	 	 	-

M4. Would you please give me the name, address and telephone number of someone we could contact if you move, such as a friend, relative or neighbour. (I want to emphasize that we will contact this person only if you move and then only to obtain your new address or telephone number.) Unable to provide contact Go to N1
M5. Name of Contact

	Surname 🕨 🦲		
Мб.	Address of Contact		
	Street and Number/ Lot and Concession	►	
	City, Town, Village Municipality	►	
	Province, Territory	►	
	Postal Code	►	

_ ___ - __ ___ ___

M7. Home Telephone of Contact

Given Name

(Area code)

Section N: Interviewer Check Items

N1. INTERVIEWER:

Thank the respondent and end interview.

N2. INTERVIEWER CHECK ITEM

What is the sex of the respondent?

Male

Female

N3. End Time ____: ___

APPENDIX C

ACTIVITY CODE LIST

DAILY ACTIVITY CODE LIST

Employed Work S Work for Pay 011 Work for Pay at Main Job 012 Work for Pay at Other Job(s) 021 **Overtime Work** Looking for Work Unpaid Work in a Family Business or Farm 022 023 Travel During Work 030 040 Waiting/Delays at Work 050 Meals/Snacks at Work 060 Idle Time Before/After Work 070 **Coffee/Other Breaks** 080 Other Work Activity 090 Travel: To/From Work Domestic Work Food Preparation 101 Meal Preparation 102 Baking, Preserving Food, Home Brewing, etc. 110 ₽ Food (or Meal) Cleanup 120 Indoor Cleaning 130 Outdoor Cleaning 140 Laundry, Ironing, Folding Sewing and Mending 151 Mending/Shoe Care 152 Dressmaking and Sewing Repair and Improvement 161 Interior Maintenance and Repair 162 Exterior Maintenance and Repair 163 Vehicle Maintenance 164 Other Home Improvements Gardening and Pet Care S 171 Gardening/Grounds Maintenance 172 Pet Care 173 Care of House Plants Other Domestic Work 181 Household Administration, e.g. Paying Bills, Menu Planning, etc. 182 Stacking and Cutting Firewood 183 Other Domestic Work (not specified above) 190 Travel: Domestic Care Giving for Household Hembers Baby Care - Household Child 200 210 Child Care - Household Child f 220 Helping/Teaching/Reprimanding 230 Reading/Talking/Conversation with Child 240 Play with Children 250 Medical Care - Household Child 260 Unpaid Babysitting Help and Personal Care for Adults 271 Personal Care - Household Adults 272 Medical Care - Household Adults 280 Other Child Care Travel: Household Members 291 Travel: Household Child 292 Travel: Household Adults

		d Services
		Shopping
		Groceries
	302 303	Clothing, Gas, etc. Take-out Food
	310	Shopping for Durable Household Goods
	320	Personal Care Services (e.g Haircut)
		nt and Financial Services
	331	Financial Services (e.g. banking)
	332	Government Services (e.g. UIC)
	340	Adult Medical and Dental Care
	350	Other Professional Services
	Maintena 361	nce and Repair Services Automobile Maintenance and Repair
	362	
	370	Waiting for Purchases or Services
	380	Other Shopping and Services
	390	Travel: Goods/Services
	sonal Ca 400	re Washing, Dressing
	410	Personal Medical Care (Home)
	430	Meals at Home/Snacks/Coffee
	440	Restaurant Meals
	450	Night Sleep/Essential Sleep
	460	Incidental Sleep, Naps
	470	Relaxing, Thinking, Resting
	480	Other Personal Care or Private Activities
	490	Travel: Personal
) Ch	ool and	Education
	500	Full-Time Classes
		ne Classes
		Other Classes (Part-Time)
	512	
	520	Special Lectures: Occasional
	530 540	Homework: Course, Career/Self-Development Meals/Snacks/Coffee at School
	550	Breaks/Waiting for Class
	560	Leisure and Special Interest Classes
	580	Other Study
	590	Travel: Education
		and Volumbary and Baligian Astivity
л ș	600	nal, Voluntary and Religious Activity Professional, Union, General
	610	Political, Civic Activity
	620	Child, Youth, Family Organization
	630	Religious Meetings, Organizations
	640	Religious Services/Prayer/Bible Readings
	Social	Organizations and Support Groups
	651	Fraternal and Social Organizations (e.g.
	(65	Lions' Club) Support Groups (e.g. Al-Anon, AA)
	652	Volumteer Work (Organizations)
	Assista	Volunteer Work, (Organizations) nce to Nember of Another Household
	671	Housework and Cooking Assistance
	672	House Maintenance and Repair Assistance
	673	Unpaid Babysitting
		Transportation Assistance
	675	Care for Disabled or Ill
	676 677	Correspondence Assistance Unpaid Help for a Business or Farm
	678	
	680	Other Organizational, Voluntary and Religious
		Activity
	690	Travel: Organisations, Voluntary or Religious
		activities

DAILY ACTIVITY CODE LIST

Entertainment (Attending) Sports Events 900 701 Professional 702 Amateur Pop Music, Fairs, Concerts 711 Pop Music, Concerts 712 Fairs 713 Zoos 715 2005 720 Movies, Films 730 Opera, Ballet, Theatre Museums, Art Galleries and Heritage Sites 741 Museums 742 Art Galleries 743 Heritage Sites 940 Socializing with Friends, Relatives, Others (Private Residence) 751 Socializing (No Meal) 752 Socializing (W/Meal, Excl. Restaurants) Socializing at Bars, Clubs (no meal) Other Social Gatherings (Weddings, Wakes) 760 980 990 780 790 Travel: Fotertainment Sports and Hobbies (Participation) 800 Coaching 000 Sports, Physical Exercise, Outdoors Activities 801 Football, Baseball, Hockey, etc. 802 Tennis, Squash, Racquetball, etc. 001 002 803 Golf, Miniature Golf 804 Swimming, Waterskiing Skiing, Ice Skating, etc. 805 Bowling, Pool, etc. Exercises, Yoga, Weight Lifting 806 807 808 Judo, Boxing, Wrestling, Fencing 809 Rowing, Canoeing, Kayaking and Sailing Other Sports, e.g. Frisbee, Catch 810 Kunting 811 812 Fishing Boating 813 814 Camping 815 Horseback Riding, Rodeo, Jumping, Dressage 816 Other Outdoor Activities - Excursions Walking, Hiking, Biking 821 Walking, Hiking 821 Walking 822 Biking Hobbies 831 Hobbies Done Mainly for Pleasure 832 Hobbies Done For Sale or Exchange of Items Domestic Home Crafts 841 Domestic Home Crafts Done Mainly for Pleasure 842 Domestic Home Crafts Done For Sale or Exchange of Items 850 Husic, Theatre, Dance Games, Cards, Arcade, Video games 861 Games, Cards, Arcade 862 Video Games/Computer Games 863 General Computer Use (Not Games) Pleasure Drives, Sightseeing 871 Pleasure Drives as a Driver 872 Pleasure Drives as a Passenger in a Car 873 Other Pleasure Drives (e.g. bus tour) Other Sport or Active Leisure 880 890 Travel: Sports, Hobbies

Media and Communication Listening to the Radio Television, Rented Movies 911 Watching Television (regular scheduled television) 912 Watching Television (time-shifted television) 913 Watching Rented or Purchased Movies 914 Other Television Viewing (home recorded movies) 920 CD's, Tapes, Records, Listening Reading Books, Magazines 931 Reading Books 932 Reading Magazines **Reading Newspapers** 950 Talking, Conversation, Phone Letters and Mail 961 Reading Mail 962 Other (Writing Letters) Other Media or Communication Travel: Media or Communication Problem Activities Activity not coded Missing Gap in Time Refused Information