Introduction

Today’s survey touches on various aspects of life today. We are trying to better understand people’s different life experiences. As always, there are no right or wrong answers — we just want your honest perspective.

While some of the questions may seem somewhat personal, please be assured of the strict confidentiality of all our surveys. Responses are pooled with all others and only analyzed on a combined aggregate basis.

Life stage/Family situation

Let’s begin with a few questions about you.

Q1. How many people currently live in your household -- including yourself?

You live alone
Two/One other person
Three people
Four people
Five or more people in household

Q2. What is your current marital status? Are you:

Single/Never married
Married
Common-law/Living as married
Separated/Divorced
Widowed

Q3. Do you have children?

No, no children [EXCLUSIVE]
Yes, have a child/children under 18
Yes, have a child/children over 18

Q4. Are you currently working/studying outside the home?

Yes, working (or studying) full-time
Yes, working (or studying) part-time
No, not working (or studying) at this time
**Community involvement/Lifestyle**

Q5. There are many ways in which a person might participate in their community -- and some people prefer not to be involved in these types of things. Do you yourself do any of the following:

[ROWS - RANDOMIZE]

Participate in neighbourhood or community projects (such as neighbourhood clean-up or community gardening or youth programs etc.)

Use the local community centre or library

Volunteer for a community group or cause

Go out to events like live music or theatre

Socialize with your neighbours (beyond a quick "hello")

[COLUMNS]
Yes, I do so regularly
Yes, something I have done, but not regularly
No, this is not really me

Q6. Now, thinking about the geographic community or neighbourhood you live in, how would you describe your own sense of belonging there? Is it:

Very weak - you don’t feel you belong at all
Somewhat weak
Somewhat strong
Very strong - you really feel that you belong there

Q6.5. If you had to pick one of these to describe you, would you say you are:

[ROATE]
More of an extrovert – you crave and thrive on social time
More of an introvert – you crave and thrive on quiet time

**Life Satisfaction – fundamentals and relationships**

Q7. How would you describe each of the following aspects of your life these days?

[ROWS - RANDOMIZE]

Your current financial situation (how much money you have)

Your own physical health (how often you are sick, whether you have medical conditions etc.)
Your own mental health (things like depression or anxiety or moods etc.)

Your social life (time spent with friends)

[COLUMNS]
Very good
Good
Only fair
Poor
Very poor

Q8. Thinking now about the relationships in your life today, how would you describe:

[ROWS - RANDOMIZE]

[IF WORKING/STUDYING IN Q4:]
Your relationships with co-workers/other students

[IF MARRIED/COMMON LAW IN Q2]
Your relationship with your spouse

Your relationship with other members of your immediate family

Your relationship with your closest friends

[COLUMNS]
Very good
Good
Only fair
Poor
Very poor

[IF SINGLE IN Q2]
Q9. And what about being single and not living with a spouse. Would you describe that as:

Very good
Good
Only fair
Poor
Very poor

Q10. How satisfied are you with your life overall today?

Very satisfied
Moderately satisfied
Not very satisfied
Not at all satisfied
Objective measures of social isolation/networks

Our next questions are about social contacts, which can be very different from person to person. Please respond based on your current situation (realizing it may have been different in the past or could change in the future).

Q11a. These days, how much time are you alone?

(Whether or not you may be interacting online or busy doing a hobby or something, we want to know how often you are physically alone with no one else with you.)

No time alone these days
Rarely
Sometimes
Often
Always alone these days

Q11b. And, as far as you’re concerned, is the amount of time you spend alone about right, or would you change it?

[ HIDE FOR THOSE WHO SAY “NO TIME ALONE” ] Rather have less time alone than now
[ HIDE FOR THOSE WHO SAY “ALWAYS ALONE” ] Rather have more time alone
Current is about right

Q11c. Have you ever spent a special occasion (like Thanksgiving or your birthday) alone when you would have rather been with other people? (Not counting having to miss solely due to health or travel problems.)

Yes, often alone on special occasions
Sometimes/It has happened
No, always with others for special events

Q12. We’re also interested in your time with other people. Specifically, let’s focus only on face-to-face visiting and interacting, not online and not just being in the same room. Thinking of this past month, how often have you been socially interacting with:

[ ROWS – THIS ORDER ]

[ IF NOT LIVING ALONE IN Q1 ]
Other members of your household

[ IF WORKING/STUDYING IN Q4 ]
Co-workers/Other students (in a social sense, not just work/school)

[ ALL ]
Family members not living with you

Friends
Your neighbours (beyond a quick hello)

Other acquaintances

[COLUMNS]
Not at all this month
Once or twice
A few times/weekly
Many times
All the time/Daily or more

Q13. Generally, in your life, how often do you have a meaningful personal conversation (face-to-face) with someone about what’s happening in your life and/or in theirs?

All the time – regular part of your life
Often
Sometimes
Only rarely
Never

Q14a. How many people in your life today do you consider to be “good friends”?

#:________

Q14b. Is that enough or do you wish you had more good friends?

Enough good friends
Wish I had more

Q15. Thinking about your personal social contact and interactions these days (referring here to the positive kind you welcome and enjoy, not an “obligation”), would you say it has been increasing or decreasing in recent years?

Increasing, now have enjoyable social contact more often
Decreasing, now have less
About the same/No change

Q16. Was there a specific period or phase in your life where you felt lonelier or more socially disconnected than usual? And if so, when was that?

[MULTI-CHOICE]

No, no particular phase [ANCHOR, EXCLUSIVE]
Yes: (Select all that may apply)
Growing up
As a new parent
Newly married
A break-up/divorce
Moved cities
Changed jobs
Illness
Loss of a loved one
[ANCHOR] Other (Specify: _____)

Q17a. If you ran into some serious financial trouble right now, do you have relatives or friends you could count on to help you out with some financial assistance (say, with a few hundred dollars)?

Yes, could count on at least a few people
Could count on one or two
Maybe
No, not really

Q17b. If you faced a serious personal crisis, do you feel you could count on someone to lean on for emotional support?

Yes, could count on at least a few people
Could count on one or two
Maybe
No, not really

Q18. Let’s think about your social circle – this would include your good friends as well as other people you see socially. Generally speaking, are the people in your social circle from the same or a different background as you in terms of:

[Randomize items]
Religious beliefs
Ethnic background
Financial situation

[COLUMNS]
Very much the same
Pretty much the same
Quite different
Very different backgrounds
Not sure/Can’t say

Q19a. We’ve been talking about in-person face-to-face contact. Now we’d also like to know how often, if at all, you do each of the following for social reasons and staying in touch (not for an emergency):

[ROWS]
Talk on the phone with family or friends
Use video calling like Skype, Apple Facetime etc.

Interact with family or friends via social media apps, text or email

[COLUMNS]
All the time – regular part of your life
Often
Sometimes
Only rarely
Never

[FOR THOSE WHO SAY SOMETIMES, OFTEN, ALL THE TIME, FOR VIDEO CALLING:]
Q19b. And what are your overall feelings about keeping in touch using these video calling applications? Would you say:

I appreciate it, it makes me feel more connected
It’s better than nothing
I dislike it because there’s less real face-to-face contact now

[FOR THOSE WHO SAY SOMETIMES, OFTEN, ALL THE TIME, FOR SOCIAL MEDIA, TEXT, EMAIL:]
Q19c. And what are your overall feelings about keeping in touch via social media or text or email? Would you say:

I appreciate it, it makes me feel more connected
It’s better than nothing
I dislike it because there’s less real face-to-face contact now

Subjective measures of social isolation and loneliness

We want to get a better understanding of people’s personal life experiences – some of the different circumstances and feelings people may have in their life. These are personal in nature – as always, there are no right or wrong answers.

[ROTATE PRESENTATION ORDER OF Q 20 and 21]

Q20. How often do you yourself experience the following?

[ROWS – RANDOMIZE]

Wish you had someone you could to talk to, but don’t
Worry about being alone and lonely in the future
Feel alone when you’re with other people
Feel rejected by other people
Feel that people close to you don’t understand you
Feel too busy to spend quality time with family and friends
Feel lonely and wish you had more friendly human contact
Wish you had someone to go out places with

[COLUMNS]

Often feel this way
Sometimes
Rarely
Never feel this way

Q21. Do you agree or disagree with each of the following statements as a description of you and your life today (realizing it may have been different in the past or could change in the future)?

[ROWS - RANDOMIZE]

People in my life care about me
People in my life know me
People in my life respect me
I am close to the other people in my life
I get along with people I come into contact with
I know people miss me when I’m away
I can always trust the people close to me

[COLUMNS]
Strongly Agree
Moderately Agree
Moderately Disagree
Strongly Disagree

**Personal involvement**

Q22a. Are there people in your social circle – family, friends, other people you know – who you would say are lonely and need more companionship in their lives?

Yes, for sure
Maybe
No, don’t think so

[IF YES OR MAYBE]

Q22b. Do you currently make a point of spending time visiting someone you feel may be lonely and in need of companionship?

Yes, regularly
From time-to-time
No, don’t make a point

Q22c. Do you wish your own family and friends would spend more time visiting and socializing with you?

Yes, lots more
Some more time would be nice
No, current time is about right

Q23a. Let’s set aside loneliness and companionship for a moment. Are there people in your social circle – family, friends, other people you know (but not including children/anyone under 18) – who have trouble doing some things entirely on their own? This could include things like grocery shopping or getting to appointments or heavy housework, and it could be a result of a mobility issue or being an older age or any kind of challenge.

Yes
No

[IF YES]

Q23b. Do you currently spend time helping someone out with things like that (errands etc.)?

Yes, regularly
From time-to-time
No, do not

Q24a. Are you yourself able to live entirely independently when it comes to things like that (getting out to appointments, other errands, heavy housework) or do you need assistance with some things?

Independent
Need some assistance
Need a lot of assistance

[IF NEED SOME OR A LOT OF ASSISTANCE]

Q24b. And do you have family or friends that help you out with those things (not counting any assistance you might pay for)?

Yes, lots of help from family and friends
Some help/from time-to-time
No, no real help
Other Areas of Inquiry – Linkages

Religion/Spectrum of Spirituality

Q25. These next questions are about you and your own personal beliefs. As always there are no right or wrong answers – we just want to understand people better.

a. Do you believe:

[Rows -- This order]

That God or a higher power exists
In life after death

[Columns]
Yes, I definitely do believe
Yes, I think so
No, I don’t think so
No, I definitely do not believe

b. How often, if at all, do you:

[Rows – Randomize]

Pray to God or some higher power
Attend religious services (other than weddings or funerals)
Feel you experience God’s presence
Read the Bible, Quran, or other sacred text
Talk about matters of personal faith with family or friends

[Responses]
Never
Only rarely
A few times a year
Once or twice a month
Once a week or so
A few times a week
Everyday

[If Don’t think/Definitely do not believe God or a higher power exists at Q25a, Ask:]
c. You have indicated that you do not believe that God or a higher power exists – or that you don’t think so. Just to confirm, how would you describe yourself when it comes to the whole area of personal faith or spirituality? Would you say:
You do not have any feelings of faith or spirituality
Have some/at some time
You do have feelings of faith or spirituality in your life

[EVERYONE]
d. Do you agree or disagree:

It’s important for parents to teach their children religious beliefs

Strongly Agree
Moderately Agree
Moderately Disagree
Strongly Disagree

e. Which one of the following best describes your religion?

Roman Catholic
United Church
Anglican
Lutheran
Presbyterian
Baptist
Pentecostal
Other evangelical Christian
Other Christian

Muslim
Hindu
Jewish
Sikh
Buddhist

No religious identity
Other (please specify)

Faith-group outreach efforts

[ASK ALL WHO DO NOT SAY ‘NO RELIGIOUS IDENTITY]

Q26a. As far as you know, does your own faith group or religious community:

[ROWS]

Have outreach efforts to assist people needing practical help (getting to appointments, running errands, etc.)?
Have outreach efforts to assist people who may be lonely and in need of companionship?
[COLUMNS]

Yes, outreach for other members
Yes, outreach to broader community (non-members too)
No, no outreach you are aware of [Exclusive]

[IF YES TO EITHER OR BOTH]

26b. Are you personally involved in any of those outreach efforts with your own Church or other faith group?

Yes, regularly
A bit/from time-to-time
No, not involved

Other Life Experience

Just to wrap up our survey, a few additional questions about you.

Q27. Would you say you are a member of a visible minority (in terms of your ethnicity/heritage/race)?

Yes
No

Q28. Are you an Indigenous Canadian?

No, not Indigenous
Yes, First Nation
Yes, Inuit
Yes, Métis
Yes, Other Indigenous

Q29. Do you consider yourself to be a member of the LGBTQ community?

Yes
No

Q30. Do you have what you consider to be a “physical disability”? Let’s include here any significant mobility problems, whether experienced from birth or related to aging or injury, hearing or visual impairment, or anything else like this.

Yes, I have a physical disability
No, I do not have a physical disability
I have mobility or other physical, vision or hearing challenges, but don’t consider myself to have a disability

Thank you so much for your time today. Finally, a couple of quick questions about your childhood.
31. As a child, did you receive any formal religious education outside of the home – for example, attending a religious school, or Sunday school or similar lessons and activities for children at a church, mosque or temple?

Yes, this was part of my upbringing
Only a bit of this/Just here and there
No, did not have religious education outside the home

32. Were your parents together while you were growing up?

Yes, together throughout
Together for some/Not for all
No, not together

33. How many siblings did you grow up with?

No siblings, only child
One sibling
Two siblings
Three or more siblings