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Participation and Activity Limitation Survey, 2001

Disability Supports in Canada, 2001



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Statistics Canada
Housing, Family and Social Statistics Division

Participation and Activity Limitation Survey, 2001

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- . not available for any reference period
- .. not available for a specific reference period
- ... not applicable
- P preliminary
- r revised
- x suppressed to meet the confidentiality requirements of the *Statistics Act*
- E use with caution
- F too unreliable to be published

Disability Supports in Canada, 2001

About this article

This article is the second in a series of releases of data from the 2001 Participation and Activity Limitation Survey (PALS).

This article presents data on the various support measures for adults (persons aged 15 and over) with disabilities. The themes included in this document are specialized equipment, help needed for everyday activities, dwelling modifications, local and long distance transportation, and tax credits.

For more detailed statistical tables on these topics, including provincial breakdowns, please see Catalogue no. 89-581-XIE.

The first survey results were published in December 2002 in an article containing findings on the prevalence, type and severity of disabilities by age and sex (see Catalogue no. 89-577-XIE for further information).

PALS is a national survey that gathers information on adults and children in Canada who have a disability, that is, whose everyday activities are limited because of a condition or health problem. Funded by Human Resources Development Canada and conducted by Statistics Canada, PALS provides essential information on the prevalence of various disabilities, the supports for persons with disabilities, their employment profile, their income and their participation in society.

The survey was conducted between September 2001 and January 2002, from a sample of 35,000 adults and 8,000 children with disabilities. The population covered by the survey consisted of persons residing in private households and some collective (non-institutional) households in the ten provinces. Persons living in institutions and persons living in Yukon, the Northwest Territories or Nunavut or on First Nations reserves were excluded from the survey.

Use of assistive aids and devices

Assistive aids and devices include all specialized aids, devices or services that enable persons with disabilities to carry out their everyday activities, such as by making it easier for them to get around (wheelchair, hand or arm support) or by helping them to hear, see or speak (hearing aid, Braille reading materials, keyboard device for communicating). However, assistive aids do not include glasses and contact lenses, since these are commonly used visual aids, and most people who use them report not having activity limitations caused by their visual problems.

To assess the assistive aids needs of persons with disabilities, PALS asked respondents about their use of and unmet needs for specialized equipment for disabilities related to hearing, seeing, speech, mobility, agility and learning disabilities, as well as other aids or specialized equipment. It is possible, therefore, to distinguish persons who had all the assistive aids that they needed, those who had some specialized equipment but needed more, and those who needed specialized equipment but had none.

In 2001, 1.6 million persons with disabilities aged 15 and over (out of 3.4 million) needed assistive aids and devices. The majority of them had obtained all the specialized equipment that they needed (61%); however, 29% used some equipment but needed more, and 10% did not have any of the equipment that they needed.

Persons aged 65 and over were more likely to have all the assistive aids that they needed (69%) than were persons aged 15 to 64 (54%). In addition, 13% of working-age persons and 7% of elderly persons reported having none of the specialized equipment that they needed.

The same proportion of men and women aged 15 and over, namely 39%, had unmet needs for specialized equipment (see Table 1). The difference was not significant between men and women aged 15 to 64 (46% and 47% respectively), and it was small between men and women aged 65 and over (29% and 32% respectively).

The more severe the disability, the more respondents reported having unmet needs for specialized equipment. The proportion of persons who used some assistive aids but needed more went from 10% for persons with mild limitations to 22% for those with moderate limitations; it increased to 33% for those with severe limitations and climbed to 50% for those with very severe limitations. Also, regardless of the severity of the disability, approximately 10% of respondents had none of the assistive aids needed.

Among persons with disabilities aged 15 and over who had unmet needs for assistive aids, nearly one in two (48%) cited the high cost of the equipment as the reason why they did not have it. Approximately one person in three reported that the equipment was not covered by his/her insurance (36%). Also, 13% of respondents did not know how to obtain the equipment that they needed, and 11% felt that their condition was not severe enough for them to have specialized equipment. Few reported that equipment was not available (4%). Nearly 19% said that they lacked assistive aids for reasons other than those included in PALS.

Persons aged 15 to 64 were more likely to explain their lack of specialized equipment by its high cost (51%) or its not being covered by their insurance (40%) than were persons aged 65 and over (44% of whom attributed this to the cost and 30% to their insufficient insurance coverage). There was no major difference between men and women as to the reasons for their lack of assistive aids. Also, persons with severe or very severe disabilities tended to explain their unmet need for specialized equipment more often by its cost (49%), their insufficient insurance coverage (38%) or not knowing how to obtain it (14%), compared with persons with mild limitations (39%, 31% and 10% respectively).

Help with everyday activities

To identify the need for help with everyday activities, PALS used a series of questions on the following activities: meal preparation, everyday housework (such as dusting and tidying up), heavy household chores, transportation (grocery shopping, getting to appointments), personal finances (banking, bills), child care, personal care and moving around within the home. Survey respondents were asked to indicate whether, because of their disability, they were receiving help in carrying out these various activities, whether they needed help or additional help, and who usually provided the help that they received.

Some 2.2 million adults with disabilities (out of 3.4 million) reported receiving help or needing help to perform one of the above-mentioned activities. About two-thirds of this population indicated receiving all the help required, but more than 765,000 of them, or 35%, indicated that they had needs for help that were unmet. Within the population aged 15 to 64, 37% reported unmet needs, compared to 33% of persons aged 65 and over. Overall, the same proportion of men and women reported unmet needs for help (34% of men and 36% of women). Of those aged 15 to 64, 39% of women reported unmet needs, compared to 35% of men, while there was little difference between men and women aged 65 and over.

Persons with very severe disabilities had the highest proportion of unmet needs. Half of them stated that they needed help with various everyday activities but help was not available. Some 23% of persons with mild disabilities reported unmet needs, along with 30% of persons with moderate disabilities and 39% of those with severe disabilities. These data appear to indicate that the more severe the disability, the less the needs for help are met (see Table 2).

Help with carrying out everyday activities can come from various sources, and respondents could indicate more than one: family members, friends or neighbours, organizations or agencies, and other sources. According to the PALS data, 63% of adults with disabilities who received help received it from members of their family living with them, 42% received it from family members not living with them, 24% from friends or neighbours, 22% from organizations or agencies, and 14% from other sources.

These data underline the importance of the family in providing help to persons with disabilities. Men and women reported roughly the same sources of help, except with respect to friends and neighbours and agencies. Thus, 28% of men reported receiving help from their friends or neighbours, compared to 22% of women.

However, there were differences depending on respondents' age. While 73% of respondents aged 15 to 64 stated that they received help from members of their family living with them, the proportion falls to 52% for respondents aged 65 and over. Conversely, older respondents were more likely to receive help from members of their family not living with them (48%) than were respondents aged 15 to 64 (38%). For both

these age groups, it is always family members who play the main role in providing help, whether or not they live with the respondent.

The more severe the disability, the more important is the role of the family. Thus, 56% of persons with mild disabilities obtained help from family members living with them, while the proportion rises to 60% for respondents with moderate disabilities, to 67% for respondents with severe disabilities and 69% for those with very severe disabilities. Family members not living with the respondent were cited as sources of help by 36% of respondents with mild disabilities, 42% of those with moderate disabilities, 44% of those with severe disabilities and 48% of those with very severe disabilities.

In 2001, just over 771,000 persons with disabilities needed help and did not receive it for a variety of reasons (respondents could indicate more than one). For half of them, the cost of help was cited as a reason for not having the help required. A quarter of respondents reported that informal help (from family or friends) was not available, and a quarter also indicated that the cost of help was not covered by their insurance plan. Lastly, just under a quarter of respondents also stated that they did not know how to obtain the help required.

Special features in the home

Special features in the home include all specialized features within the residence such as handrails, visual alarms or audio warning devices and adapted bathrooms, as well as modifications that enable the person to enter or leave the dwelling (such as a ramp).

In 2001, 483,000 adults with disabilities needed special features in their dwelling. Most of them reported having obtained all the modifications that they needed (63%). On the other hand, 26% had none of the modifications that they needed, and 11% had obtained some modifications but needed more.

According to the PALS findings, persons aged 65 and over were more likely to have obtained all the modifications that they needed than were adults aged 15 to 64. Nearly half of working-age persons reported having everything that they needed, compared with 73% of seniors. Persons aged 15 to 64 were also more likely not to have obtained any modifications that they needed (37%) compared with seniors (18%).

Women with disabilities were more likely than men to need special features inside and outside their dwelling, regardless of their age. Nevertheless, their needs were met to same extent as men's, that is to say there was no significant difference between the proportion of men and women who reported unmet needs for modifications.

Persons with more severe limitations were more likely to have unmet needs for special features in the home. The proportion of adults who had obtained some modifications but needed more varied from 5% for those with a moderate disability to 11% for those with severe limitations to 16% for those with a very severe disability. Just over a quarter of

respondents had none of the modifications that they needed, and this proportion varied little with the degree of severity of the disability (see Table 3).

Among adults with disabilities who had not obtained all the modifications that they needed, 62% reported that high costs were the reason why they did not have them, and 43% reported that the modifications were not covered by their insurance plan. Few people lacked the necessary modifications because they were not approved or recommended by a health care professional (6%) or because they were on a waiting list (5%). One third (33%) of persons reported that there were other reasons, not specified in the PALS questionnaire, for the lack of modifications to their dwelling.

Persons aged 15 to 64 were more likely to explain their lack of modifications by high costs (72%) or lack of insurance coverage (51%) than were persons with disabilities in the 65-and-over age group (47% and 30% respectively). There was a slight difference between men and women as to the reasons why their needs for modifications to their dwelling were unmet. Women were more likely to cite cost factors, while men were more likely to cite insurance reasons. The greater the severity of the disability, the more likely that cost and insurance reasons would be cited to explain why the need for modifications was unmet. Among persons with a very severe disability, 71% cited high costs and 55% cited their insurance plan to explain their lack of modifications, while for persons with mild activity limitations, the corresponding percentages were 38% and 12%.

Difficulties with transportation

The ability to travel, either locally or long distance, is a crucial factor in social participation. For many persons with disabilities in 2001, local and long distance transportation posed problems.

PALS asked respondents to report their use of public transportation services for travelling locally, including buses, specialized buses, subways and taxis, during the twelve months preceding the survey. Some 4% of adults with disabilities reported being completely prevented from using these services, with the percentage once again rising with the level of severity, from 2% of adults with mild or moderate disabilities to 5% of those with severe disabilities and 11% of those with very severe disabilities. Among respondents reporting that they had used public transportation, approximately 17% stated that they had had some difficulty; the percentage rose from 6% of adults with mild disabilities to 14%, 24% and 35% respectively of adults with moderate, severe and very severe disabilities (see Table 4).

PALS found that approximately 60,000 adults with disabilities reported being completely prevented from travelling locally by car. In total, this figure represented some 2% of adults with disabilities. This percentage was fairly stable for all levels of severity, except for the very severe level where it reached 6%. Among adults who were not totally prevented from travelling locally by car, about 19% nevertheless reported having difficulties. Once again, the percentage increased with the severity of the disability,

increasing from 6% among adults with mild disabilities to nearly half (48%) for adults with very severe disabilities.

Just over one million respondents stated that they had travelled long distance by car during the year preceding the survey. Of them, about 32% reported having had difficulties during these trips. The percentage increased with the severity of the disability, reaching 64% for adults with very severe disabilities.

Approximately 270,000 adults with disabilities (8%) were completely prevented from travelling long distance in 2001. This percentage climbed to 21% for adults with very severe disabilities. Among the population travelling long distance by airplane, train or bus, one person in five reported having difficulties. Here again, the greater the severity of the disability, the higher the percentage of respondents reporting difficulties: it varied from 8% of adults with mild disabilities to 43% of those with very severe disabilities.

Tax credits

To evaluate the proportion of persons with disabilities who received income support measures through the tax system, PALS used questions where respondents had to state whether they had claimed and obtained tax credits. This article focuses on the Medical Expense Tax Credit and the Disability Tax Credit.

Medical Expense Tax Credit

PALS findings show that 705,000 adults reported claiming a Medical Expense Tax Credit on their income tax return for the year 2000. Of this number, 75% or 526,000 persons reported receiving the tax credit.

A larger proportion of persons aged 65 and over received the Medical Expense Tax Credit (76%) than of persons aged 15 to 64 (73%). The proportion of men aged 15 and over who received the tax credit is also higher than the corresponding proportion of women, namely 77% compared with 73%. But this difference between men and women is greater for the 65-and-over age group, where 82% of men had obtained the tax credit compared with 72% of women.

The proportion of adults who received the Medical Expense Tax Credit declines with the severity of the disability. Thus, 78% of persons with mild limitations, 75% with moderate or severe limitations and 68% of those with very severe disabilities received the tax credit. However, it should be noted that the number of persons who did not know whether they had claimed or received the tax credit was fairly high and increased with the severity of the disability. Thus, 20% of respondents with very severe disabilities did not know about their situation with respect to this tax credit. The data on tax credits will have to be examined in greater detail, especially in conjunction with data on income levels and out-of-pocket expenses relating to disability (data to become available during 2003).

Disability Tax Credit

Nearly 345,000 persons aged 15 and over reported having claimed a Disability Tax Credit on their income tax return for the year 2000. Nearly 80% of them, or 277,000 persons, reported receiving the tax credit.

Those aged 65 and over were more likely to receive the tax credit that they had claimed (86%) than were persons aged 15 to 64 (77%). Also, 89% of elderly men and 83% of elderly women reported that they had obtained the tax credit, compared with 79% of women and 76% of men of working age.

A larger proportion of adults with moderate or severe disabilities who had claimed the Disability Tax Credit received it (83% and 85%, but the difference is not significant) than was the case with those with very severe disabilities (78%) and those with mild disabilities (72%). Here again, in interpreting these findings, it is necessary to keep in mind the relatively large proportion of respondents who indicated that they were unaware of their situation with respect to this tax credit.

Nearly 2.5 million adults with disabilities reported that they had not claimed a Disability Tax Credit. Of this number, 44% did not claim it because they did not think they met the eligibility requirements, 37% did not know that the tax credit existed, 9% cited other reasons not specified in the PALS questionnaire, and 4% stated that they were unable to obtain a disability certificate (Form T2201) from their doctor.

The reasons for not claiming the Disability Tax Credit did not vary by age or sex, but they varied with the severity of the disability. Persons with less severe limitations were more likely to respond that they did not think they were eligible for the tax credit (50% of persons with mild disabilities, compared with 28% of those with very severe disabilities). Also, the greater the severity of the disability, the higher the proportion of persons who did not claim the tax credit because they were unaware of its existence. Thus, 30% of persons with mild disabilities, 37% of those with moderate disabilities, 41% of those with severe disabilities and 51% of those with very severe disabilities reported that they did not know that the Disability Tax Credit existed.

Upcoming PALS releases

Other PALS data will be made available during 2003. These will include information on:

- Education and employment among adults with disabilities
- Income level and sources
- Support measures for children with disabilities and their families
- Leisure activities of adults and children with disabilities
- Health conditions underlying disabilities

Table 1
Adults with disabilities who use or need assistive aids, by level of severity, Canada, 2001¹

	Level of severity					
	Total ²		Mild		Moderate	
	Number	%	Number	%	Number	%
Use or need of aids						
Total persons using or needing aids	1,604,610	100	352,560	100	381,430	100
Persons using aids but needing more	459,930	29	35,050	10	81,940	21
Persons not using aids but needing some	164,600	10	37,940	11	45,670	12
Persons using all aids needed	980,080	61	279,560	79	253,820	67
			Severe		Very Severe	
			Number	%	Number	%
Total persons using or needing aids			528,030	100	342,600	100
Persons using aids but needing more			173,000	33	169,930	50
Persons not using aids but needing some			49,390	9	31,600	9
Persons using all aids needed			305,630	58	141,070	41

¹ The Canada total excludes the Yukon, Northwest Territories and Nunavut.

² The sum of the values for each category may differ from the total due to rounding.

Source: Statistics Canada, Participation and Activity Limitation Survey, 2001.

Table 2**Adults with disabilities who need or receive help, by level of severity, Canada, 2001¹**

	Level of severity					
	Total ²		Mild		Moderate	
	Number	%	Number	%	Number	%
Use or need help						
Total persons receiving or needing help	2,176,530	100	502,310	100	546,610	100
Persons receiving help but needing more	640,280	29	86,410	17	132,620	24
Persons not receiving help but needing some	125,620	6	30,410	6	34,050 ^E	6
Persons receiving all help needed	1,410,630	65	385,490	77	379,940	70
			Severe		Very Severe	
			Number	%	Number	%
Total persons receiving or needing help			723,460	100	404,150	100
Persons receiving help but needing more			235,500	33	185,750	46
Persons not receiving help but needing some			44,340	6	16,810 ^E	4
Persons receiving all help needed			443,610	61	201,580	50

¹ The Canada total excludes the Yukon, Northwest Territories and Nunavut.² The sum of the values for each category may differ from the total due to rounding.

Source: Statistics Canada, Participation and Activity Limitation Survey, 2001.

Table 3
Adults with disabilities who use or need housing modifications, by level of severity,
Canada, 2001¹

	Level of severity					
	Total ²		Mild		Moderate	
	Number	%	Number	%	Number	%
Use or need housing modifications						
Total persons using or needing modifications	483,030	100	63,670	100	85,650	100
Persons using modifications but needing more	53,790	11	5,130 ^E	8	3,860 ^E	5
Persons not using modifications but needing some	125,780	26	17,360 ^E	27	19,200 ^E	22
Persons using all modifications needed	303,450	63	41,190	65	62,590	73
					Very Severe	
			Severe		Severe	
			Number	%	Number	%
Total persons using or needing modifications			169,280	100	164,420	100
Persons using modifications but needing more			18,270	11	26,540	16
Persons not using modifications but needing some			44,700	26	44,530	27
Persons using all modifications needed			106,310	63	93,360	57

¹ The Canada total excludes the Yukon, Northwest Territories and Nunavut.

² The sum of the values for each category may differ from the total due to rounding.

Source: Statistics Canada, Participation and Activity Limitation Survey, 20 01.

Table 4
Adults with disabilities and local travel by specialized bus or public transportation, by level of severity, Canada 2001¹

	Level of severity					
	Total ²		Mild		Moderate	
	Number	%	Number	%	Number	%
Local travel by special bus or public transportation						
Total	1,049,020	100	326,970	100	268,160	100
Adults who travelled locally and had difficulty	179,280	17	18,130 ^E	6	36,330	14
Adults who travelled locally and had no difficulty	869,740	83	308,830	94	231,830	86
			Severe		Very Severe	
			Number	%	Number	%
Total			300,180	100	153,710	100
Adults who travelled locally and had difficulty			70,830	24	53,990	35
Adults who travelled locally and had no difficulty			229,350	76	99,720	65

¹ The Canada total excludes the Yukon, Northwest Territories and Nunavut.

² The sum of the values for each category may differ from the total due to rounding.

Source: Statistics Canada, Participation and Activity Limitation Survey, 2001.

Variable derivations and definitions

Variable derivations

Derivation of variables on assistive aids and devices

PALS respondents were asked a series of questions to identify whether or not they USED assistive aids or devices to assist them with daily functions, such as hearing, seeing, speaking, walking, etc. Respondents were also asked a series of questions about whether or not they NEEDED any aids or devices they did not have (i.e. unmet needs). In order to find out to what extent persons with disabilities had access to the aids/devices that they needed, the information about the USE of aids and the NEED for aids was combined in a derived variable. The derivation of this variable was done in two steps:

Firstly, two new variables called “USEAID” and “NEEDAID” were created:

USEAID was created by using those questions that identified whether or not the respondents USED any assistive aids or devices because of a health condition, such as aids for hearing, seeing, speech, mobility, agility, learning or other health conditions.

NEEDAID was constructed by using those questions that identified whether or not the respondents NEEDED any aids or devices for hearing, seeing, speech, mobility, agility, learning or other health conditions.

Secondly, the following combinations were used to create four categories:

- | | |
|---|--------------------------------|
| a) Use aids/devices, but need more: | USEAID = YES and NEEDAID = YES |
| b) Don't use aids/devices, but need some: | USEAID = NO and NEEDAID = YES |
| c) Have all the aids needed: | USEAID = YES and NEEDAID = NO |
| d) Don't use and don't need aids: | USEAID = NO and NEEDAID = NO |

Derivation of variables on help with everyday activities

PALS respondents were asked a series of questions to identify whether or not they RECEIVED help with everyday activities because of a health condition. Respondents were also asked a series of questions about whether or not they NEEDED any help with everyday activities that they did not receive (i.e. unmet needs). In this survey, “everyday activities” included the following eight activities or tasks: (1) meal preparation; (2) everyday housework (e.g. dusting and tidying up); (3) heavy household chores; (4) getting to appointments, running errands and grocery shopping; (5) looking after personal finances; (6) child care; (7) personal care; and (8) moving about inside the home/residence.

In order to find out to what extent persons with disabilities had access to the help that they needed, the information about the USE of help and the NEED for help was combined in a derived variable. The derivation of this variable was done in two steps:

Firstly, two new variables called “USEHELP” and “WANTHELP” were created:

USEHELP was created by using those questions that identified whether or not the respondents RECEIVED any help with everyday activities because of a health condition.

WANTHELP was constructed by using those questions that identified whether or not the respondents NEEDED any help with everyday activities.

Secondly, the following combinations were used to create four categories:

- | | |
|-----------------------------------|----------------------------------|
| a) Use help, but need more: | USEHELP = YES and WANTHELP = YES |
| b) Don't use help, but need some: | USEHELP = NO and WANTHELP = YES |
| c) Have all the help needed: | USEHELP = YES and WANTHELP = NO |
| d) Don't use and don't need help: | USEHELP = NO and WANTHELP = NO |

Derivation of variables on specialized features in the home

PALS respondents were asked questions to identify whether or not, because of a health condition, they USED any specialized features to enter or leave their residence or inside their residence. Respondents were also asked questions about whether or not they NEEDED any specialized features that they did not have (i.e. unmet needs). In order to find out to what extent persons with disabilities had access to the specialized features they needed at home, the information about the USE of features and the NEED for features was combined. The following combinations were used to create four categories:

- | | |
|---------------------------------------|---|
| a) Use features, but need more: | Use of features = YES and Need for features = YES |
| b) Don't use features, but need some: | Use of features = NO and Need for features = YES |
| c) Have all the features needed: | Use of features = YES and Need for features = NO |
| d) Don't use and don't need features: | Use of features = NO and Need for features = NO |

Derivation of “prevented from travelling” locally by specialized bus services or local transportation

“Prevented from travelling” refers to respondents who indicated that they had not travelled locally by specialized bus services, or local public transportation including buses, subways and taxis in the past 12 months, and that they were prevented from doing so.

Derivation of “prevented from travelling” locally by car

“Prevented from travelling” refers to respondents who indicated that they had not travelled locally by car in the past 12 months, and that they were prevented from doing so.

Derivation of “prevented from travelling” long distance

“Prevented from travelling” refers to respondents who indicated that they had not taken any long distance trips in the past 12 months, and that they were prevented from doing so.

Definitions

Assistive aids or devices:

Refer to specialized aids or devices used or needed by persons with activity limitations to help them perform daily activities or tasks. Examples of aids or devices are a hearing aid, wheelchair, cane, talking books, reach extenders, etc.

Disability:

The Participation and Activity Limitation Survey uses the World Health Organization’s (WHO) framework of disability provided by the International Classification of Functioning (ICF). This framework defines disability as the relationship between body structures and functions, daily activities and social participation, while recognizing the role of environmental factors.

For the purposes of PALS, persons with disabilities are those who reported difficulties with daily living activities, or who indicated that a physical, mental condition or health problem reduced the kind or amount of activities they could do.

The respondents’ answers to the disability questions represent their perception of the situation and are therefore subjective.

Disability Tax Credit:

The Disability Tax Credit is available to an individual with a severe and prolonged mental or physical impairment that markedly restricts him or her in activities of daily living.

Help with everyday activities:

Help received or needed with everyday activities because of a health condition. In PALS, everyday activities include the following eight activities or tasks:

- 1) meal preparation
- 2) everyday housework (e.g. dusting and tidying up)
- 3) heavy household chores (e.g. spring cleaning and yard work)
- 4) getting to appointments, running errands and grocery shopping
- 5) looking after personal finances (e.g. making bank transactions or paying bills)
- 6) child care
- 7) personal care (e.g. washing and dressing)
- 8) moving about inside the home/residence

Medical Tax Credit:

The Medical Tax Credit applies to individuals who have sustained significant medical expenses for themselves or certain dependants.

Severity of disability:

An index measuring the severity of the disability was constructed based on the answers to the survey questions. Points were given according to the intensity and the frequency of the activity limitations reported by the respondent. A single score was computed for each type of disability. Each score was then standardized in order to have a value between 0 and 1. The final score is the average of the scores for each type of disability. The scale for adults was divided into four groups (that is, *mild, moderate, severe and very severe*).

Specialized features:

Refer to specialized features used or needed by persons with activity limitations to enter or leave their residence, or move about inside their residence. Examples include ramps, automatic doors, widened doorways and lift devices.

Unmet needs for assistive aids or devices:

This refers to persons with activity limitations who reported that they did not have the aids or devices they needed.

Unmet needs for help with everyday activities:

This refers to persons with activity limitations who reported that they did not have the help they needed with everyday activities.

Unmet needs for specialized features in the home:

This refers to persons with activity limitations who reported that they did not have the specialized features they needed to enter or leave their residence, or inside their residence.