

# ROAD MAP TO GSS CYCLE 11

## I. Overview of the Survey Content

The help received **Screening Section** collected information on the respondent's temporary difficult times (TDT) and developed a roster of persons and/or organizations who assisted the respondent in his/her everyday activities due to the respondent's long-term health or physical limitations (LTH). This information was used to establish the help roster. Persons/organizations giving care such as checking up or providing emotional support were added to the roster, however, there was no detailed follow-up.

The help given **Screening Section** collected information on the TDT of the people the respondent helped. Information was also collected about the persons and/or organizations whom the respondent assisted due to the receiver's LTH with this information also used to establish or add to the roster. Persons/organizations receiving care from the respondent such as checking up or providing emotional support were added to the roster, however, there was no detailed follow-up.

**Section A** collected demographic information on persons/organizations who did not live in the household but who assisted the respondent due to the respondent's LTH. And, **Section D** asked for demographic information on non-household members/organizations listed on the roster whom the respondent assisted due to the receiver's LTH.

**Section B** expanded on the data collected in the screening questions by providing more detailed information on the persons/organizations who assisted the respondent due to the respondent's LTH.

**Section C** asked if the assistance received by the respondent met the respondent's needs.

**Section E** expanded on the data collected in the screening questions by providing more detailed information on persons/organizations whom the respondent assisted due to the receiver's LTH.

**Sections F, G, H, I, J** asked information about the respondent.

### OBJECTIVE

The Screening Sections and Sections B, C and E of the questionnaire consist of blocks of questions repeated for each activity, this document is a summary of each set of questions.

## II. Overview of the Survey Questions

### Screening Section - Help Received by Respondent

Blocks of questions on “help received” by the respondent due their TDT and LTH were repeated for each of four major groups of instrumental activities of daily living. These activities were: 1) child-care; 2) meal preparation and clean-up; house cleaning; laundry and sewing; house maintenance and outside work; 3) shopping for groceries or other necessities; transportation; banking and bill paying; and 4) personal care.

Below are the questions asked on the help received with meal preparation and clean-up; house cleaning; laundry and sewing; house maintenance and outside work. These questions were repeated for all four sets of activities.

#### Questions:

25. In the past 12 months, has any organization or anyone OTHER THAN YOU DONE ANY PART OF YOUR meal preparation and clean-up, house cleaning, laundry and sewing, or house maintenance and outside work?
27. Because of the way these activities are shared in your household?
28. Because time constraints do not allow you to do it by yourself?
29. Because of your long-term health or physical limitations?
30. Because of temporary difficult times?
34. The next few questions are about those temporary difficult times. What was the cause of those temporary difficult times?
35. With which activities did you receive assistance?  
<1>Meal preparation and clean-up  
<2>House cleaning, laundry and sewing  
<3>House maintenance and outside work
36. What is the relationship(s) to you of the person(s) who provided assistance with these activities?  
36A. Does this person live in your household?
37. How long ago did someone begin to provide assistance with these activities?
38. Is assistance with these activities continuing?
39. How long ago did someone stop assisting you with these activities?
40. Do you expect someone to continue to provide assistance with these activities in the future?

41. Do/Did you need any additional assistance with these activities?
42. Why do/did you need additional assistance with these activities?  
<1>Temporary difficult time  
<2>To allow you more time for other things  
<3>Because of your long-term health or physical limitations or failing health  
<4>Other
43. For which activity do/did you need additional assistance?  
<1>Meal preparation and clean-up  
<2>House cleaning, laundry and sewing  
<3>House maintenance and outside work
44. Do/Did you need assistance with any of these activities?
45. Why do/did you need assistance with these activities?  
<1>Temporary difficult time  
<2>To allow you more time for other things  
<3>Because of your long-term health or physical limitations or failing health  
<4>Other
46. For which activity do/did you need assistance?  
<1>Meal preparation and clean-up  
<2>House cleaning, laundry and sewing  
<3>House maintenance and outside work
48. Now that you've told us about the temporary situations you have experienced in the last 12 months, we are going to discuss persons or organizations who assisted you because of your long-term health or physical limitations.
49. The beginning of the roster building.

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Persons/organizations checking up on or providing emotional support to the respondent were also added to the roster. However, very little additional information on checking up and emotional support was asked in Section B.

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### **Screening Section - Help Given by Respondent**

Blocks of questions on the “help given” by the respondent due to temporary difficult times and long-term health problems of the receiver were repeated for each of four major groups of instrumental activities of daily living. These activities were: 1) child-care; 2) meal preparation and clean-up; house cleaning; laundry and sewing; house maintenance and outside work; 3) shopping for groceries or other necessities; transportation; banking and bill paying; and 4) personal care.

Below are the questions asked on the help given with meal preparation and clean-up; house cleaning; laundry and sewing; house maintenance and outside work. These questions were repeated for all four sets of activities.

### Questions:

110. In the past 12 months, did YOU INDIVIDUALLY OR ON BEHALF OF AN ORGANIZATION do any part of someone's meal preparation and clean-up, house cleaning, laundry and sewing, or house maintenance and outside work?
112. Because of their long-term health or physical limitations?
113. Because of their temporary difficult times?
115. What was the reason?
117. The next few questions are about those temporary difficult times. What was the cause of their temporary difficult time?
118. Which activities do/did you do or assist with?  
<1> Meal preparation and clean-up  
<2>House cleaning, laundry and sewing  
<3>House maintenance and outside work
119. What is the relationship(s) to you of the person(s) to whom you provided assistance with these activities?119A. Does this person live in your household?
120. How long ago did you begin to provide assistance with these activities?
121. Is this assistance continuing?
122. How long ago did you stop assisting someone with these activities?
123. Do you expect to continue to provide assistance with these activities in the future?
124. Why?
126. Now that you've told us about temporary situations, we are going to discuss persons or organizations who you assisted because of their long-term health or physical limitations.
127. The beginning of the roster building (or adding to the roster).

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Persons whom the respondent checked up on or provided emotional support to were added to the roster. Very little additional information on checking up and emotional support was asked in Section E.

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## Section B: Help Received by Respondent - Day to Day Help

Section B collected information on persons/organizations who assisted the respondent due to the respondent's long-term health or physical limitations. Blocks of questions on the help received by the respondent were repeated for each of eight instrumental activities of daily living (childcare; meal preparation and clean-up; house cleaning, laundry and sewing; shopping for groceries and other necessities; transportation; banking and bill paying and personal care) .

These questions were repeated for all eight activities.

### Questions:

- B01. During the past 12 months, has {Person X} assisted with {Activity Y}?
- B02. How often does {Person X} help with {Activity Y}?
- B02A. What is the number of times DAILY {Person X} provides assistance with {Activity Y}?
- B02B. What is the number of times WEEKLY {Person X} provides assistance with {Activity Y}?
- B02C. What is the number of times MONTHLY {Person X} provides assistance with {Activity Y}?
- B03. About how much time does {Person X} spend on {Activity Y} on each occasion?
- B04. How long ago did you begin to receive assistance from {Person X} with {Activity Y}?
- B05. Is {Person X} paid for providing assistance with {Activity Y}?
- B06. What is the relationship to you of the person or organization who PAYS {Person X} for assisting with {Activity Y}?
- B07. What is the relationship to you of the person or organization who ARRANGED for {Person X} to assist you with {Activity Y}?
- B08. Was it difficult to arrange {Person X}'s assistance with {Activity Y}?
- B09. What difficulties were experienced arranging {Person X}'s assistance with {Activity Y}?

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Additional information was collected on other activities respondent received assistance with, emotional support and the respondent's primary caregiver.

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## **Section C: Unmet needs -Help Received by Respondent**

Section C asked if the assistance received due to long-term health or physical limitations met the respondent's needs. Blocks of questions on unmet needs were repeated for each of eight instrumental activities of daily living (childcare; meal preparation and clean-up; house cleaning, laundry and sewing; shopping for groceries and other necessities; transportation; banking and bill paying and personal care) .

These questions were repeated for all eight activities.

### **Questions:**

- C02. If you had to, how much of {Activity Y} could you do without assistance?
- C03. Is the assistance you receive with {Activity Y} adequate to meet your needs?
- C04. What change would you make in assistance with {Activity Y} to adequately meet your needs? (specify) \_\_\_\_\_
- C05. What sources of information were used when searching for this assistance with {Activity Y}?

## **Section E: Help Given by Respondent - Day to Day Help**

Section E collected information on persons/organizations whom the respondent assisted due to the receiver's long-term health or physical limitations. Blocks of questions on the help given by the respondent were repeated for each of eight instrumental activities of daily living (childcare; meal preparation and clean-up; house cleaning, laundry and sewing; shopping for groceries and other necessities; transportation; banking and bill paying and personal care) .

These questions were repeated for all eight activities.

### **Questions:**

- E01. During the past 12 months, have you assisted {Person X} with {Activity Y}??
- E02. Have you made arrangements for assistance to be provided to {Person X} for {Activity Y}?
- E03. How often did you assist {Person X} with {Activity Y}??
- E03A. What is the number of times DAILY you assisted {Person X} with {Activity Y}??

- E03B. What is the number of times WEEKLY you assisted {Person X} with {Activity Y}??
- E03C. What is the number of times MONTHLY you assisted {Person X} with {Activity Y}??
- E04. About how much time do you spend assisting {Person X} with {Activity Y} on each occasion?
- E05. How long ago did you begin to assist {Person X} with {Activity Y}??
- E06. Do you expect to continue to assist {Person X} with {Activity Y}??
- E07. Why do you not expect to continue to provide this assistance?
- E08. Who ARRANGED for {Person X} to receive your assistance with {Activity Y}?
- E09. Who would take/have taken over assisting {Person X} with {Activity Y} if you were not available?

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Additional information was collected on other activities respondent gave assistance with, emotional support and the respondent as primary caregiver.

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