

Variables	Questions
<b>province</b>	Where do you live? - Province or Territory
<b>city</b>	Where do you live? - City Note: If the place you live is not listed, select the city that is nearest to where you live.
<b>age</b>	How old are you (in years)?
<b>gender</b>	How do you identify, in terms of gender? - Selected Choice
<b>gender_text</b>	How do you identify, in terms of gender? - None of the above, I identify as - Text
<b>identity_vetrans</b>	Do you belong to any of the following groups? (Check all that apply) - Veterans
<b>identity_indigenous</b>	Do you belong to any of the following groups? (Check all that apply) - Indigenous peoples (e.g., First Nations, Metis, Inuit)
<b>identity_lgbtq</b>	Do you belong to any of the following groups? (Check all that apply) - Sexual or gender minorities (e.g., LGBTQ2+)
<b>identity_disability</b>	Do you belong to any of the following groups? (Check all that apply) - People with chronic health problems or disabilities (e.g., Living with any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairments "or a functional limitation "whether permanent, temporary or episodic in nature, or evident or not, that, in interaction with a barrier, hinders a person s full and equal participation in society.)
<b>identity_bipoc</b>	Do you belong to any of the following groups? (Check all that apply) - People of colour (e.g., Black, Indigenous, Asian or other racialized minority)
<b>identity_pwud</b>	Do you belong to any of the following groups? (Check all that apply) - People who have substance abuse problems
<b>identity_newcomers</b>	Do you belong to any of the following groups? (Check all that apply) - Newcomers (e.g., Recent immigrants and refugees, i.e. being in Canada for less than 10 years)
<b>identity_homeless</b>	Do you belong to any of the following groups? (Check all that apply) - People who are experiencing homelessness or have in the past
<b>identity_mental_health</b>	Do you belong to any of the following groups? (Check all that apply) - People with mental health challenges
<b>identity_none</b>	Do you belong to any of the following groups? (Check all that apply) - None of the above
<b>relationship_status</b>	What is your current relationship status?
<b>covid_distancing</b>	To what extent are you currently following the COVID-19 prevention practices listed below? - Physically distance yourself by 2 metres from others

<b>covid_masks</b>	To what extent are you currently following the COVID-19 prevention practices listed below? - Wear a mask in public
<b>covid_hand_washing</b>	To what extent are you currently following the COVID-19 prevention practices listed below? - Wash your hands often
<b>covid_reduce_people</b>	To what extent are you currently following the COVID-19 prevention practices listed below? - Reduce the number of people you interact with
<b>covid_avoid_trips</b>	To what extent are you currently following the COVID-19 prevention practices listed below? - Avoid non-essential trips in the community
<b>covid_household</b>	To what extent are you currently following the COVID-19 prevention practices listed below? - Socialize indoors only with people in your immediate household
<b>vaccinated</b>	Have you received a COVID-19 Vaccine?
<b>vaccinated_two_weeks_since_last_dose</b>	Did you receive your last COVID-19 vaccine dose more than 2 weeks ago?
<b>life_satisfaction</b>	On a scale of 1 to 10, How do you feel about your life as a whole right now?
<b>burnout_tired</b>	When you think about your life overall, how often do you feel the following? - Tired
<b>burnout_disappointed</b>	When you think about your life overall, how often do you feel the following? - Disappointed with people
<b>burnout_hopeless</b>	When you think about your life overall, how often do you feel the following? - Hopeless
<b>burnout_trapped</b>	When you think about your life overall, how often do you feel the following? - Trapped
<b>burnout_helpless</b>	When you think about your life overall, how often do you feel the following? - Helpless
<b>burnout_depressed</b>	When you think about your life overall, how often do you feel the following? - Depressed
<b>burnout_sick</b>	When you think about your life overall, how often do you feel the following? - Physically weak or sickly
<b>burnout_worthless</b>	When you think about your life overall, how often do you feel the following? - Worthless or like a failure
<b>burnout_difficulty_sleeping</b>	When you think about your life overall, how often do you feel the following? - Difficulties sleeping
<b>burnout_had_it</b>	When you think about your life overall, how often do you feel the following? - Ive had it ☹️
<b>meaningful_interactions</b>	How often do you have meaningful social interactions?
<b>p3m_greeted_stranger</b>	In the PAST THREE MONTH, how often have you... - greeted a stranger (e.g., by saying hello or good morning)?
<b>p3m_greeted_neighbour</b>	In the PAST THREE MONTH, how often have you... - greeted a neighbour or acquaintance (e.g., by saying hello or good morning)?

<b>p3m_talked_day</b>	In the PAST THREE MONTH, how often have you... - talked to someone about how your / their day was going?
<b>p3m_talked_family</b>	In the PAST THREE MONTH, how often have you... - talked to someone about how your / their family was?
<b>p3m_talked_job</b>	In the PAST THREE MONTH, how often have you... - talked to someone about your / their job?
<b>p3m_talked_hobbies</b>	In the PAST THREE MONTH, how often have you... - talked to someone about your / their hobbies or interests?
<b>p3m_phone</b>	In the PAST THREE MONTH, how often have you... - had a phone conversation with a friend or family member?
<b>p3m_letter_or_email</b>	In the PAST THREE MONTH, how often have you... - wrote a letter or personal email to a friend or family member?
<b>p3m_checked_in</b>	In the PAST THREE MONTH, how often have you... - sent a text/private message to someone just to check in?
<b>p3m_text_or_messaged</b>	In the PAST THREE MONTH, how often have you... - received a text/private message from someone who was checking in with you?
<b>p3m_chat</b>	In the PAST THREE MONTH, how often have you... - had an extended conversation via text or a messaging app?
<b>p3m_video_chat</b>	In the PAST THREE MONTH, how often have you... - had a video chat with a friend or family member?
<b>p3m_group_video_chat</b>	In the PAST THREE MONTH, how often have you... - had a video chat with a GROUP of friends or family?
<b>p3m_walk</b>	In the PAST THREE MONTH, how often have you... - went for a walk with someone?
<b>p3m_coffee</b>	In the PAST THREE MONTH, how often have you... - met someone for a meal, drink, dessert, or cup of coffee?
<b>p3m_board_games</b>	In the PAST THREE MONTH, how often have you... - played a board game with others?
<b>p3m_computer_games</b>	In the PAST THREE MONTH, how often have you... - played a computer or console (e.g., Wii, Xbox, PlayStation) game with others?
<b>p3m_online_games</b>	In the PAST THREE MONTH, how often have you... - played an online game with others?
<b>p3m_visited_friends</b>	In the PAST THREE MONTH, how often have you... - visited with FRIENDS at your / their home?
<b>p3m_visited_family</b>	In the PAST THREE MONTH, how often have you... - visited with FAMILY at your / their home?

<b>p3m_community</b>	In the PAST THREE MONTH, how often have you... - volunteered in the community?
<b>p3m_helped</b>	In the PAST THREE MONTH, how often have you... - helped a neighbor or friend with a task or chore (e.g., yard work, moving)?
<b>p3m_meeting_work</b>	In the PAST THREE MONTH, how often have you... - attended a meeting at work?
<b>p3m_meeting_organization</b>	In the PAST THREE MONTH, how often have you... - attended a meeting of other organization(s) (i.e. outside of work)?
<b>p3m_discussion_group</b>	In the PAST THREE MONTH, how often have you... - participated in an online discussion group?
<b>p3m_group_exercise</b>	In the PAST THREE MONTH, how often have you... - participated in group exercise (e.g., yoga classes, cycling)?
<b>p3m_church</b>	In the PAST THREE MONTH, how often have you... - attended church, synagogue, temple, etc.?
<b>p3m_new_friend</b>	In the PAST THREE MONTH, how often have you... - made a new friend?
<b>p3m_hug</b>	In the PAST THREE MONTH, how often have you... - hugged someone?
<b>p3m_kissed</b>	In the PAST THREE MONTH, how often have you... - kissed someone?
<b>p3m_sex</b>	In the PAST THREE MONTH, how often have you... - had sex with someone?
<b>loneliness_companionship</b>	Indicate how often each of the statements below is descriptive of you. - How often do you feel that you lack companionship?
<b>loneliness_left_out</b>	Indicate how often each of the statements below is descriptive of you. - How often do you feel left out?
<b>loneliness_isolated</b>	Indicate how often each of the statements below is descriptive of you. - How often do you feel isolated from others?
<b>close_friends_num</b>	How many close friends do you have?
<b>satisfied_num_friends</b>	Are you satisfied with the number of friends you have now?
<b>neighbours_name_num</b>	How many of your neighbours do you know by name? Note: By neighbors we mean people who live next door, in your building, and/or on your street.
<b>five_mins_family</b>	In the PAST WEEK, how many days did you spend at least 5 minutes socializing with people from the following groups? - Family Members
<b>five_mins_friends</b>	In the PAST WEEK, how many days did you spend at least 5 minutes socializing with people from the following groups? - Friends
<b>five_mins_coworkers</b>	In the PAST WEEK, how many days did you spend at least 5 minutes socializing with people from the following groups? - Coworkers or Classmates

<b>five_mins_neighbours</b>	In the PAST WEEK, how many days did you spend at least 5 minutes socializing with people from the following groups? - Neighbours
<b>hours_family</b>	In the PAST WEEK, how many hours in total did you spend socializing with others from the following groups? - Family Members
<b>hours_friends</b>	In the PAST WEEK, how many hours in total did you spend socializing with others from the following groups? - Friends
<b>hours_coworkers</b>	In the PAST WEEK, how many hours in total did you spend socializing with others from the following groups? - Coworkers or Classmates
<b>hours_neighbours</b>	In the PAST WEEK, how many hours in total did you spend socializing with others from the following groups? - Neighbours
<b>five_min_family_num</b>	In the PAST WEEK, how many people from each of the following groups did you spend at least 5 minutes socializing with? - Family Members
<b>five_min_friends_num</b>	In the PAST WEEK, how many people from each of the following groups did you spend at least 5 minutes socializing with? - Friends
<b>five_mins_coworkers_num</b>	In the PAST WEEK, how many people from each of the following groups did you spend at least 5 minutes socializing with? - Coworkers or Classmates
<b>five_mins_neighbours_num</b>	In the PAST WEEK, how many people from each of the following groups did you spend at least 5 minutes socializing with? - Neighbours
<b>time_preference_family</b>	How much time per week would you like to spend socializing with others from the following groups? - Family Members
<b>time_preference_friends</b>	How much time per week would you like to spend socializing with others from the following groups? - Friends
<b>time_preference_coworkers</b>	How much time per week would you like to spend socializing with others from the following groups? - Coworkers or Classmates
<b>time_preference_neighbours</b>	How much time per week would you like to spend socializing with others from the following groups? - Neighbours
<b>meaningful_time_family</b>	Generally speaking, how much of your time spent with each of the following groups is meaningful and fulfilling? - Family Members
<b>meaningful_time_friends</b>	Generally speaking, how much of your time spent with each of the following groups is meaningful and fulfilling? - Friends
<b>meaningful_time_coworkers</b>	Generally speaking, how much of your time spent with each of the following groups is meaningful and fulfilling? - Coworkers or Classmates
<b>meaningful_time_neighbours</b>	Generally speaking, how much of your time spent with each of the following groups is meaningful and fulfilling? - Neighbours

<b>time_satisfied</b>	Are you satisfied with the amount of time you spend with others?
<b>effort_connect</b>	How much effort do you put into intentionally connecting with others?
<b>effort_connect_others</b>	How much effort do you feel others put into intentionally connecting with you?
<b>satisfied_single</b>	In general, how satisfied are you with being single?
<b>relationship_duration</b>	How long have you been in a relationship? If you have multiple partners, indicate how long have you been in a relationship with your longest-term partner.
<b>satisfied_relationship</b>	In general, how satisfied are you with your romantic relationships? Note if you have multiple relationships, choose the option that reflects your overall satisfaction with them.
<b>sexual_relationship_status</b>	What best describes your sexual relationship status?
<b>live_with_partner</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Husband, wife, or common-law partner
<b>live_with_children</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Son or daughter (including step children, foster children, and children-in-laws)
<b>live_with_grandkids</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Grandchildren
<b>live_with_parent</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Father or mother
<b>live_with_in_laws</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Father-in-law or mother-in-law
<b>live_with_siblings</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Siblings (e.g., Brother or Sister)
<b>live_with_roommate</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Room-mate, lodger or boarder

<b>live_with_other</b>	How many people from each of the groups below do you live with at least 50% of the time? Note: If you do not live with anyone in a given category, enter 0. Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Other
<b>live_with_dogs</b>	How many of the following companion animals (or pets) do you live with?Note: Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Dogs
<b>live_with_cats</b>	How many of the following companion animals (or pets) do you live with?Note: Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Cats
<b>live_with_ferrets</b>	How many of the following companion animals (or pets) do you live with?Note: Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Ferrets
<b>live_with_birds</b>	How many of the following companion animals (or pets) do you live with?Note: Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Birds
<b>live_with_fish</b>	How many of the following companion animals (or pets) do you live with?Note: Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Fish
<b>live_with_other_pet</b>	How many of the following companion animals (or pets) do you live with?Note: Please only enter numeric characters (0,1,2,3,4,5,6,7,8,9) - Other
<b>dejong_emptiness</b>	Please indicate for each of the statements, the extent to which they apply to your situation, the way you feel now. - I experience a general sense of emptiness
<b>dejong_rely</b>	Please indicate for each of the statements, the extent to which they apply to your situation, the way you feel now. - There are plenty of people I can rely on when I have problems
<b>dejong_trust</b>	Please indicate for each of the statements, the extent to which they apply to your situation, the way you feel now. - There are many people I can trust completely
<b>dejong_close</b>	Please indicate for each of the statements, the extent to which they apply to your situation, the way you feel now. - There are enough people I feel close to
<b>dejong_miss</b>	Please indicate for each of the statements, the extent to which they apply to your situation, the way you feel now. - I miss having people around
<b>dejong_rejected</b>	Please indicate for each of the statements, the extent to which they apply to your situation, the way you feel now. - I often feel rejected
<b>lonely_direct</b>	During the PAST WEEK, have you felt lonely
<b>lonely_duration</b>	For about how long have you consistently felt that you were lonely [QID45-ChoiceGroup-SelectedChoices]?
<b>lonely_change_covid</b>	Comparing how you feel now to how you felt before the COVID-19 Pandemic, how would you describe the intensity of your loneliness?



<b>lonely_miss_fun</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Fun and laughter / Leisure
<b>lonely_miss_meaningful_conversation</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Meaningful conversation
<b>lonely_miss_touch</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Physical touch/hug, affection
<b>lonely_miss_hanging_out</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Being with other people/ hanging out
<b>lonely_miss_understand</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Someone to understand me
<b>lonely_miss_doing</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Doing something with other people
<b>lonely_miss_mattering</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Mattering to someone/being able to help someone
<b>lonely_miss_something_else</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Selected Choice - Something else
<b>lonely_miss_something_else_text</b>	When you have felt lonely, what did you miss most? (Check all that apply) - Something else - Text
<b>lonely_others_aware</b>	Generally speaking, do you think others are aware of the extent to which you feel lonely or connected?
<b>steptoe_isolation_index_kids</b>	Do you have KIDS with whom you see, talk to, text, email, or write to at least once a month?
<b>steptoe_isolation_index_other_fam</b>	Do you have OTHER FAMILY MEMBERS with whom you see, talk to, text, email, or write to at least once a month?
<b>steptoe_isolation_index_friends</b>	Do you have OTHER FRIENDS with whom you see, talk to, text, email, or write to at least once a month?
<b>time_sleeping</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - sleeping
<b>time_working</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - working
<b>time_hanging</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - hanging out with friends
<b>time_family</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - spending time with family



<b>time_me</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - me ☞ time
<b>time_winding_down</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - winding down
<b>time_exercising</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - exercising
<b>time_media</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - reading news or social media
<b>time_thinking</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - sitting and thinking about things important to me
<b>time_talking</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - talking about important things with others
<b>time_being_understood</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - talking with someone who really understands me
<b>time_hobbies</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - practicing hobbies and skills
<b>time_helping</b>	Please rate whether you spend too much time, too little time, or just the right amount of time doing each of the following activities: - helping others and volunteering
<b>social_media_visits_per_day</b>	How many times per day do you visit social networking websites (e.g., Instagram, Facebook, Twitter), on Average?
<b>social_media_time_per_day</b>	In the past week, on average, approximately how much time PER DAY have you spent actively using social networking websites?
<b>zimet_support_need</b>	Please respond to the following items using the scale provided - There is a special person who is around when I am in need.
<b>zimet_support_joys</b>	Please respond to the following items using the scale provided - There is a special person with whom I can share my joys and sorrows
<b>zimet_support_positive</b>	Please respond to the following items using the scale provided - There is a person who regularly makes me laugh, feel positive about myself
<b>zimet_support_gets_me</b>	Please respond to the following items using the scale provided - There is a person who really understands me on a deep level / gets me
<b>zimet_support_family_helps</b>	Please respond to the following items using the scale provided - My family really tries to help me

<b>zimet_support_family_emotional</b>	Please respond to the following items using the scale provided - I get the emotional help and support I need from my family
<b>zimet_support_comfort</b>	Please respond to the following items using the scale provided - I have a special person who is a real source of comfort to me
<b>zimet_support_help</b>	Please respond to the following items using the scale provided - My friends really try to help me.
<b>zimet_support_go_wrong</b>	Please respond to the following items using the scale provided - I can count on my friends when things go wrong
<b>zimet_support_problems_family</b>	Please respond to the following items using the scale provided - I can talk about my problems with my family
<b>zimet_support_problems_friends</b>	Please respond to the following items using the scale provided - I can talk about my problems with my friends
<b>zimet_support_sorrows</b>	Please respond to the following items using the scale provided - I have friends or family members with whom I can share my joys and sorrows
<b>zimet_support_feelings</b>	Please respond to the following items using the scale provided - There is a special person in my life who cares about my feelings
<b>zimet_support_decisions</b>	Please respond to the following items using the scale provided - My friends and family are willing to help me make decisions
<b>self Rated Physical Health</b>	At the present time, would you say your PHYSICAL HEALTH is:
<b>self Rated Mental Health</b>	At the present time, would you say your MENTAL HEALTH is:
<b>subjective_happiness_happy</b>	In general, I consider myself:
<b>subjective_happiness_peers</b>	Compared with most of my peers, I consider myself:
<b>subjective_happiness_always_happy</b>	Some people are generally very happy. They enjoy life regardless of what is going on, getting the most out of everything. To what extent does this characterization describe you?
<b>subjective_happiness_never_happy</b>	Some people are generally not very happy. Although they are not depressed, they never seem as happy as they might be. To what extent does this characterization describe you?
<b>gad_anxious</b>	Over the PAST TWO WEEKS, how often - have you felt nervous, anxious or on edge?
<b>gad_worry</b>	Over the PAST TWO WEEKS, how often - were you not able to stop worrying or control your worries?
<b>phq_little_interest</b>	Over the PAST TWO WEEKS, how often - have you had little interest or pleasure in doing things?
<b>phq_feeling_down</b>	Over the PAST TWO WEEKS, how often - were you feeling down, depressed or hopeless?

<b>sias_eye_contact</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I have difficulty making eye contact with others.
<b>sias_mixing</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I find it difficult mixing comfortably with the people I work with.
<b>sias_aquaintance</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I tense up if I meet an acquaintance on the street.
<b>sias_one_on_one</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I feel tense if I am alone with just one person.
<b>sias_talking</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I have difficulty talking with other people.
<b>sias_disagree</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I find it difficult to disagree with another's point of view.
<b>sps_walking</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I get nervous that people are staring at me as I walk down the street.
<b>sps_shaking</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I worry about shaking or trembling when I'm watched by other people.
<b>sps_bus</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I would get tense if I had to sit facing other people on bus or train.
<b>sps_attention</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I worry I might do something to attract the attention of other people.
<b>sps_elevator</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - When in an elevator, I am tense if people look at me.
<b>sps_conspicuous</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - I can feel conspicuous standing in line.
<b>privacy</b>	For each question, please indicate the degree to which you feel the statement is characteristic or true of you. - My privacy is important to me.
<b>everyday_discrimination_courtesy</b>	In your day-to-day life, how often do any of the following things happen to you? - You are treated with less courtesy than other people are.

<b>everyday_discrimination_respect</b>	In your day-to-day life, how often do any of the following things happen to you? - You are treated with less respect than other people are.
<b>everyday_discrimination_service</b>	In your day-to-day life, how often do any of the following things happen to you? - You receive poorer service than other people at restaurants or stores.
<b>everyday_discrimination_smart</b>	In your day-to-day life, how often do any of the following things happen to you? - People act as if they think you are not smart.
<b>everyday_discrimination_afraid</b>	In your day-to-day life, how often do any of the following things happen to you? - People act as if they are afraid of you.
<b>everyday_discrimination_dishonest</b>	In your day-to-day life, how often do any of the following things happen to you? - People act as if they think you are dishonest.
<b>everyday_discrimination_better_than_me</b>	In your day-to-day life, how often do any of the following things happen to you? - People act as if they re better than you are.
<b>everyday_discrimination_names</b>	In your day-to-day life, how often do any of the following things happen to you? - You are called names or insulted.
<b>everyday_discrimination_harassed</b>	In your day-to-day life, how often do any of the following things happen to you? - You are threatened or harassed.
<b>ethnicity</b>	Which of the following best describes your race or ethnicity? - Selected Choice
<b>ethnicity_text</b>	Which of the following best describes your race or ethnicity? - None of the above, I identify as - Text
<b>orientation</b>	How do you identify, in terms of your sexual orientation? - Selected Choice
<b>orientation_text</b>	How do you identify, in terms of your sexual orientation? - None of the above, I identify as - Text
<b>education_diploma</b>	Have you received any of the following degrees or certifications? (Check all that apply) - High school diploma or high school equivalency certificate
<b>education_apprenticeship</b>	Have you received any of the following degrees or certifications? (Check all that apply) - Certificate of Apprentice, Certificate of Qualification (Journey person s designation) or other trade certificate or diploma
<b>education_college</b>	Have you received any of the following degrees or certifications? (Check all that apply) - College, CEGEP or other non-university certificate or diploma
<b>education_associates</b>	Have you received any of the following degrees or certifications? (Check all that apply) - University certificate or diploma below bachelor level
<b>education_bachelors</b>	Have you received any of the following degrees or certifications? (Check all that apply) - Bachelor's degree (e.g., B.A., B.A.(Hons.), B.Sc., B.Ed., LL.B.)

<b>education_certificate</b>	Have you received any of the following degrees or certifications? (Check all that apply) - University certificate or diploma above bachelor level
<b>education_professional</b>	Have you received any of the following degrees or certifications? (Check all that apply) - Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)
<b>education_masters</b>	Have you received any of the following degrees or certifications? (Check all that apply) - Master's degree (e.g., M.A., M.Sc., M.Ed., M.B.A.)
<b>education_phd</b>	Have you received any of the following degrees or certifications? (Check all that apply) - Doctorate (e.g., Ph.D.)
<b>student</b>	Are you currently a student?
<b>hours</b>	During the COVID-19 pandemic, how many hours have you typically spent working for pay or in self-employment per week?
<b>employment_impact_not_employed</b>	Did COVID-19 impact your employment in any of the following ways? (Check all that apply) - I was not employed or self-employed before the COVID-19
<b>employment_impact_laid_off</b>	Did COVID-19 impact your employment in any of the following ways? (Check all that apply) - I was laid off temporarily or permanently
<b>employment_impact_increased_hours</b>	Did COVID-19 impact your employment in any of the following ways? (Check all that apply) - I had my hours of work increased
<b>employment_impact_decreased_hours</b>	Did COVID-19 impact your employment in any of the following ways? (Check all that apply) - I had my hours of work reduced
<b>employment_impact_new_job</b>	Did COVID-19 impact your employment in any of the following ways? (Check all that apply) - I got a new job
<b>employment_impact_no_change</b>	Did COVID-19 impact your employment in any of the following ways? (Check all that apply) - I have had no change in my hours of work
<b>occupation</b>	Please use the drop-down menu below to identify the best matching description of your occupation: Note: If you are unemployed due to the pandemic, please indicate the job that you were doing before you became unemployed.
<b>work_from_home</b>	During the COVID-19 pandemic, how often have you worked from home?
<b>commute_time</b>	How many minutes does it usually take you to get from home to work or school?
<b>commute_mode</b>	How do you usually get to school or work?
<b>online_learning</b>	During the COVID-19 pandemic, how much of your coursework and learning has occurred online?

<b>income</b>	What is your best estimate of your total household income received by all household members, from all sources, before taxes and deductions, during the year ending December 31, 2020? Note: Income can come from various sources such as from work, investments, pensions or government. Examples include Employment Insurance, Social Assistance, Child Tax Benefit and other income such as child support, spousal support (alimony) and rental income.
<b>horizontal_individualism_depend</b>	Please respond to the following items using the scale provided - I'd rather depend on myself than others.
<b>horizontal_individualism_rely</b>	Please respond to the following items using the scale provided - I rely on myself most of the time; I rarely rely on others
<b>horizontal_individualism_own_thing</b>	Please respond to the following items using the scale provided - I often do "my own thing."
<b>horizontal_individualism_important</b>	Please respond to the following items using the scale provided - My personal identity, independent of others, is very important to me.
<b>vertical_individualism_better</b>	Please respond to the following items using the scale provided - It is important that I do my job better than others.
<b>vertical_individualism_winning</b>	Please respond to the following items using the scale provided - Winning is everything.
<b>vertical_individualism_competition</b>	Please respond to the following items using the scale provided - Competition is the law of nature.
<b>vertical_individualism_tense</b>	Please respond to the following items using the scale provided - When another person does better than I do, I get tense and aroused.
<b>horizontal_collectivism_proud</b>	Please respond to the following items using the scale provided - If a coworker gets a prize, I would feel proud.
<b>horizontal_collectivism_important</b>	Please respond to the following items using the scale provided - The well-being of my coworkers is important to me.
<b>horizontal_collectivism_pleasure</b>	Please respond to the following items using the scale provided - To me, pleasure is spending time with others
<b>horizontal_collectivism_cooperate</b>	Please respond to the following items using the scale provided - I feel good when I cooperate with others.
<b>vertical_collectivism_parents</b>	Please respond to the following items using the scale provided - Parents and children must stay together as much as possible.
<b>vertical_collectivism_take_care</b>	Please respond to the following items using the scale provided - It is my duty to take care of my family, even when I have to sacrifice what I want.

<b>vertical_collectivism_family</b>	Please respond to the following items using the scale provided - Family members should stick together, no matter what sacrifices are required.
<b>vertical_collectivism_respect_group</b>	Please respond to the following items using the scale provided - It is important to me that I respect the decisions made by my groups.
<b>tipi_extraversion_1</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Extraverted, enthusiastic.
<b>tipi_agreeable_1r</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Critical, quarrelsome
<b>tipi_conscientiousness_1</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Dependable, self-disciplined
<b>tipi_emotional_stability_1r</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Anxious, easily upset.
<b>tipi_oppenness_1</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Open to new experiences, complex.
<b>tipi_extraversion_2r</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Reserved, quiet
<b>tipi_agreeable_2</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Sympathetic, warm.
<b>tipi_conscientiousness_2r</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent



	to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Disorganized, careless.
<b>tipi_emotional_stability_2</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Calm, emotionally stable.
<b>tipi_oppenness_2r</b>	Here are a number of personality traits that may or may not apply to you. Please indicate the extent to which you agree or disagree with that statement. You should rate the extent to which the pair of traits applies to you, even if one characteristic applies more strongly than the other. I see myself as - Conventional, uncreative.
<b>existential_loneliness_outlook</b>	Please use the following scale to rate the extent to which you agree or disagree with each of the following statements IN GENERAL. - I usually feel like people share my outlook on life.
<b>existential_loneliness_reactions</b>	Please use the following scale to rate the extent to which you agree or disagree with each of the following statements IN GENERAL. - I often have the same reactions to things that other people around me do.
<b>existential_loneliness_environment</b>	Please use the following scale to rate the extent to which you agree or disagree with each of the following statements IN GENERAL. - People around me tend to react to things in our environment the same way I do.
<b>existential_loneliness_share</b>	Please use the following scale to rate the extent to which you agree or disagree with each of the following statements IN GENERAL. - People do not often share my perspective.
<b>existential_loneliness_understand</b>	Please use the following scale to rate the extent to which you agree or disagree with each of the following statements IN GENERAL. - Other people usually do not understand my experiences.
<b>existential_loneliness_same_take</b>	Please use the following scale to rate the extent to which you agree or disagree with each of the following statements IN GENERAL. - People often have the same take or perspective on things that I do.
<b>self_esteem_high</b>	Rate how true of you the following statements are: - I have high self-esteem.
<b>self_esteem_body</b>	Rate how true of you the following statements are: - I am satisfied with my body.
<b>self_esteem_attractive</b>	Rate how true of you the following statements are: - I worry that others don't find me attractive
<b>self_esteem_liked</b>	Rate how true of you the following statements are: - I believe people generally like me.

<b>self_esteem_think_of_me</b>	Rate how true of you the following statements are: - I worry what other people think of me.
<b>self_esteem_friendly</b>	Rate how true of you the following statements are: - I am a friendly person.
<b>self_esteem_positive_outlook</b>	Rate how true of you the following statements are: - I have a positive outlook on life.
<b>self_esteem_energetic</b>	Rate how true of you the following statements are: - I have an energetic personality.
<b>self_esteem_proud</b>	Rate how true of you the following statements are: - I am proud of my accomplishments.
<b>attachment_secure_confident</b>	Please respond to the following items using the scale provided - I feel confident that other people will be there for me when I need them
<b>attachment_secure_close</b>	Please respond to the following items using the scale provided - I find it relatively easy to get close to other people
<b>attachment_secure_relateing</b>	Please respond to the following items using the scale provided - I feel confident about relating to others
<b>attachment_secure_respect</b>	Please respond to the following items using the scale provided - I am confident that other people will like and respect me
<b>attachment_anxious_reluctant</b>	Please respond to the following items using the scale provided - I find that others are reluctant to get as close as I would like
<b>attachment_anxious_care</b>	Please respond to the following items using the scale provided - I worry that others won't care about me as much as I care about them
<b>attachment_anxious_relationships</b>	Please respond to the following items using the scale provided - I worry a lot about my relationships
<b>attachment_anxious_left_out</b>	Please respond to the following items using the scale provided - I often feel left out or alone
<b>attachment_avoidant_keep_to_myself</b>	Please respond to the following items using the scale provided - I prefer to keep to myself
<b>attachment_avoidant_hard_to_trust</b>	Please respond to the following items using the scale provided - I find it hard to trust other people
<b>attachment_avoidant_mixed_feelings</b>	Please respond to the following items using the scale provided - I have mixed feelings about being close to others
<b>attachment_avoidant_feel_uneasy</b>	Please respond to the following items using the scale provided - While I want to get close to others, I feel uneasy about it
<b>adult_proud</b>	Growing up, how often did you have an adult who - showed they were proud of me.
<b>adult_interest</b>	Growing up, how often did you have an adult who - took an interest in my activities.
<b>adult_listened</b>	Growing up, how often did you have an adult who - listened to you when you spoke.

<b>adult_there</b>	Growing up, how often did you have an adult who - was there when you needed someone.
<b>adult_spoke</b>	Growing up, how often did you have an adult who - spoke with you about things that really mattered.
<b>adult_share</b>	Growing up, how often did you have an adult who - you could share your thoughts and feelings with.
<b>adult_help</b>	Growing up, how often did you have an adult who - you could go to for help with a problem, even if you knew they d be disappointed.
<b>friends_elementary</b>	How many close friends did you have in ? - Elementary School
<b>friends_junior_high</b>	How many close friends did you have in ? - Middle School or Junior High?
<b>friends_high_school</b>	How many close friends did you have in ? - High School
<b>provider_last_visit</b>	When was the last time you visited with a healthcare provider?
<b>primary_healthcare_provider</b>	Do you have a primary healthcare provider, such as a family doctor, nurse practitioner, or community health centre where you would normally go to for care?
<b>provider_weight</b>	Last time you visited a healthcare provider, did they: - Measure your weight
<b>provider_height</b>	Last time you visited a healthcare provider, did they: - Measure your height
<b>provider_blood pressure</b>	Last time you visited a healthcare provider, did they: - Measure your blood pressure
<b>provider_heart</b>	Last time you visited a healthcare provider, did they: - Listen to your heart
<b>provider_substance_use</b>	Last time you visited a healthcare provider, did they: - Ask you about using alcohol, tobacco, or other drugs
<b>provider_diet</b>	Last time you visited a healthcare provider, did they: - Ask you about your diet
<b>provider_physical activity</b>	Last time you visited a healthcare provider, did they: - Ask you about physical activity
<b>provider_mental_health</b>	Last time you visited a healthcare provider, did they: - Ask you about your mental health
<b>provider_social_connection</b>	Last time you visited a healthcare provider, did they: - Ask about social connection or your relationships
<b>provider_sexual_history</b>	Last time you visited a healthcare provider, did they: - Ask about your sexual history
<b>provider_substance_use_advice</b>	Last time you visited a healthcare provider, did they: - Give you advice about your substance use (e.g., smoking, alcohol consumption)
<b>provider_diet_advice</b>	Last time you visited a healthcare provider, did they: - Give you advice about nutrition or diet
<b>provider_mental_health_advice</b>	Last time you visited a healthcare provider, did they: - Give you advice about mental health

<b>provider_physical_activity_advice</b>	Last time you visited a healthcare provider, did they: - Give you advice about physical activity
<b>provider_social_connection_advice</b>	Last time you visited a healthcare provider, did they: - Give you advice about social connection or relationships
<b>provider_sex_advice</b>	Last time you visited a healthcare provider, did they: - Give you advice about safe sex or reproductive health
<b>drugs_tobacco</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Cigarettes or other tobacco products
<b>drugs_nicotine</b>	In the PAST SIX MONTHS, how often did you use the following substances? - E-cigarettes, vape pens, or other nicotine products
<b>drugs_alcohol</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Alcohol (e.g., beer, wine, liquor)
<b>drugs_cannabis</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Cannabis
<b>drugs_hallucinogens</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Hallucinogens (e.g., magic mushrooms, LSD)
<b>drugs_meth</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Amphetamines or methamphetamines
<b>drugs_cocain</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Cocaine or crack
<b>drugs_inhalents</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Inhalents (e.g., nitrous oxide, glue)
<b>drugs_heroin</b>	In the PAST SIX MONTHS, how often did you use the following substances? - Heroin
<b>drugs_pain_killers</b>	In the PAST SIX MONTHS, how often have you used the following medications when (a) they were not prescribed for you; or (b) which you took more of than you were supposed to take? - Prescription pain relievers (e.g., morphine, Percocet, vicodin, oxycontin, dilaudid, methadone, buprenorphine, etc.)
<b>drugs_sedatives</b>	In the PAST SIX MONTHS, how often have you used the following medications when (a) they were not prescribed for you; or (b) which you took more of than you were supposed to take? - Prescription sedatives (e.g., Valium, Xanax, Klonopin, Ativan, etc.)
<b>drugs_stimulants</b>	In the PAST SIX MONTHS, how often have you used the following medications when (a) they were not prescribed for you; or (b) which you took more of than you were supposed to take? - Prescription stimulants (e.g., Adderall, Ritalin, etc.)

<b>drugs_over_the_counter</b>	In the PAST SIX MONTHS, how often have you used the following medications when (a) they were not prescribed for you; or (b) which you took more of than you were supposed to take? - Over-the-counter medications (e.g., NyQuil, Benadryl, cough medicine, sleeping pills)
<b>canadian_housing_satisfaction_transit</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to public transit
<b>canadian_housing_satisfaction_programs</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to community programs (e.g. fitness programs, recreation programs, etc.)
<b>canadian_housing_satisfaction_private_spaces</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to private and semi-private outdoor spaces (e.g. yards, courtyards, patios, rooftops, etc.)
<b>canadian_housing_satisfaction_recreation</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to public open space or low-cost recreation spaces (e.g. parks, playgrounds, and community gardens, etc.)
<b>canadian_housing_satisfaction_shops</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to shops, stores or markets to buy things your household needs
<b>canadian_housing_satisfaction_health</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to medical or health care services
<b>canadian_housing_satisfaction_child_care</b>	How satisfied are you with the following aspects of your neighbourhood/complex? - Access to child care facilities or schools
<b>neighbourhood_cohesion_attracted</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - Overall, I am attracted to living in this neighbourhood
<b>neighbourhood_cohesion_belong</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I feel like I belong to this neighbourhood
<b>neighbourhood_cohesion_friends</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I visit my friends in their homes
<b>neighbourhood_cohesion_meaning</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - The friendships and associations I have with other people in my neighbourhood mean a lot to me
<b>neighbourhood_cohesion_move</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - Given the opportunity, I would like to move out of this neighbourhood

<b>neighbourhood_cohesion_advice</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - If I need advice about something I could go to someone in my neighbourhood
<b>neighbourhood_cohesion_emergency</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I believe my neighbours would help in an emergency
<b>neighbourhood_cohesion_borrow</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I borrow things and exchange favours with my neighbours
<b>neighbourhood_cohesion_willing</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I would be willing to work together with others on something to improve my neighbourhood
<b>neighbourhood_cohesion_remain</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I plan to remain a resident of this neighbourhood for a number of years
<b>neighbourhood_cohesion_similar</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I like to think of myself as similar to the people who live in this neighbourhood
<b>neighbourhood_cohesion_visits</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I rarely have a neighbour over to my house to visit
<b>neighbourhood_cohesion_stop_and_talk</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I regularly stop and talk with people in my neighbourhood
<b>neighbourhood_cohesion_sense_of_community</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - Living in this neighbourhood gives me a sense of community
<b>neighbourhood_children</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - Overall I think this is a good place to bring up children
<b>neighbourhood_traffic</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - The street I live on has too much traffic.
<b>neighbourhood_loud</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - The street I live on is too loud.

<b>neighbourhood_cohesion_planning</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - If the people in my neighbourhood were planning something, I'd think of it as something 'we' were doing rather than 'they' were doing'
<b>neighbourhood_cohesion_important</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I think I agree with most people in my neighbourhood about what is important in life
<b>neighbourhood_cohesion_loyal</b>	The questions below are about the neighborhood you live in. Rate how strongly you agree or disagree with each of the following: - I feel loyal to the people in my neighbourhood
<b>dwelling_type</b>	What is the structural type of your dwelling?
<b>own_rent</b>	Do you or your family own or rent this dwelling unit?
<b>dwelling_duration</b>	Approximately how many years have you lived in your current dwelling?
<b>housing_satisfaction</b>	How satisfied or dissatisfied are you with your current living arrangements?
<b>postal_code</b>	What is your postal code? Note: We use this data so we can understand the composition of your neighborhood better using data from the Canadian Census.
<b>housing_cost</b>	How much do you pay for housing each month? Note: Please Include rent or mortgage payments, strata fees, insurance payments, and, if applicable, property taxes.
<b>money_never_have</b>	How well do each of the statements describe you? - Because of my money situation, I feel like I will never have the things I want in life.
<b>money_fetting_by</b>	How well do each of the statements describe you? - I am just getting by financially.
<b>money_concerned</b>	How well do each of the statements describe you? - I am concerned that the money I have or will save won't last.
<b>work_dignity</b>	How well do each of the statements describe you? - I feel that I am treated with dignity and respect in my workplace.
<b>work_control</b>	How well do each of the statements describe you? - I have a lot of control over how I do my work.
<b>work_paid_enough</b>	How well do each of the statements describe you? - I am getting paid enough for the work I do.
<b>work_appreciated</b>	How well do each of the statements describe you? - I am appreciated for the work I do.
<b>work_support</b>	How well do each of the statements describe you? - I feel supported by my co-workers.
<b>work_fair</b>	How well do each of the statements describe you? - I feel my workplace is fair.
<b>work_unsustainable</b>	How well do each of the statements describe you? - I feel that my work-load is unsustainable.



<b>money_left_over</b>	How frequent are each of the statements below true for you? - I have money left over at the end of the month.
<b>money_finances_control</b>	How frequent are each of the statements below true for you? - My finances control my life.
<b>work_quitting</b>	How frequent are each of the statements below true for you? - I think about quitting my job.
<b>work_stress</b>	How frequent are each of the statements below true for you? - I feel stress about my job even when I am not at work.
<b>support_campaign</b>	How likely or unlikely is it that you would - participate in a movement or campaign that was inspiring Canadians to take action to get connected at a particular time?
<b>support_funding</b>	How likely or unlikely is it that you would - support government funding for programs and promotions that educate Canadians on the importance of human connection to our health, happiness and longevity?
<b>support_companies</b>	How likely or unlikely is it that you would - make a purchase decision based on the efforts of a business to get Canadians more socially connected?