## The following document presents the CCSD responses given to the 2016 Census Strategy Project online questionnaire.



Statistics Canada recently launched the **2016 Census Strategy Project** as part of its customary statistical program review. This project will conduct a review of the approaches for population censuses that exist around the world, and evaluate their applicability to the Canadian context as well as their adherence to Statistics Canada's mandate and business model. This review will comprise general methodological approaches and content determination frameworks, including criteria for inclusion of content in the census.

A better understanding of the highest priority census information needs is important in order to effectively address how different approaches for population censuses can respond to user information requirements.

As part of the 2016 Census Strategy Project, Statistics Canada will engage all levels of government with the intent of improving its repository of legislations, regulations, policies and programs where census is **explicitly mentioned**. For the purpose of this consultation, please consider both the census and National Household Survey (NHS). Secondary information is also being sought on high priority **implicit** requirements for census and NHS data necessary for legislations and regulations, or for policy, program and research needs.

As a valued partner and stakeholder, we would like to obtain your feedback via an on-line questionnaire designed to collect specific details on key legislative, regulatory, policy, program, and other requirements for census and NHS data. This questionnaire also seeks information on existing data holdings within your organization which Statistics Canada could consider in evaluating the feasibility of increased use of administrative data in future censuses.

Please submit your responses to the **Data Uses and Requirements** questionnaire by:

- Part 1: Legislative, regulatory, policy and program requirements (explicit)\* June 15, 2011
- Part 2: Legislative, regulatory, policy and program requirements (implicit)\* June 15, 2011
- Part 3: Other uses of census and NHS data July 20, 2011

\*Please note that Part 3 on policy and program requirements in the PDF questionnaire sent to you previously has been integrated into parts 1 and 2.

Responses will be considered representative of your organization and may be included in official documentation on this project.

Should you have questions about this initiative, please communicate with Marie Anderson, Census Marketing at <a href="mailto:censusconsultation@statcan.gc.ca">censusconsultation@statcan.gc.ca</a>.

Thank you for your participation and ongoing support.

## Part 1: Legislative, regulatory, policy and program requirements (explicit)

Please provide details about how you use census data for <u>each</u> legislation, regulation, policy and program that is relevant to your organization by answering questions 1 to 11 below. This would include those key legislations, regulations, policies and programs where census data are **explicitly** mentioned. For the purpose of this consultation, please consider both the census and National Household Survey (NHS).

Name of the legislation / regulation / policy / program

**Enter name: Community Data Consortium Program** 

- 1. Please describe, with as many categories as necessary, how census and NHS data are currently being used to support this legislation / regulation / policy / program.
  - Resource allocation
  - Performance reports
  - Planning
  - Policy development
  - Program monitoring and evaluation
  - Research
  - Service delivery
  - Cross classification (multi-variate)

- Geography distributions (geographic profiles)
- Modelling and microdata analysis, using complex analytical techniques
- Other, please specify:

Membership in the Community Data Consortium Program includes over 350 municipal governments, local authorities and other voluntary sector organizations located across Canada and committed to locally delivered public service. These organizations are dependent on small area survey and administrative data made available through the Consortium Program to measure and monitor local trends and conditions. Through its membership, the Program makes use of small area data for all the categories named above, among others.

- 2. Please check all the census and NHS topics that apply (e.g., education; labour).
  - Aboriginal Peoples
  - Activity limitations / disability
  - Basic demographics (age, sex, marital and civil status)
  - Citizenship and immigration
  - Education
  - Ethnic origin
  - Family characteristics
  - Housing / dwelling characteristics
  - Income

- Labour market activity
- Language
- Mobility and migration
- Place of work / Travel to work
- Population groups / visible minorities
- Religion
- Other, please specify.

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- 3. Please check <u>all</u> the levels of geography at which census and NHS data are needed (e.g., national; neighbourhood).
  - National
  - Provincial / territorial
  - Regional
  - Metropolitan area

- Municipal
- Neighbourhood
- Other, please specify.

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- 4. Do you require data on any specific population groups? If yes, please check <u>all</u> that apply.
  - Aboriginal Peoples
  - Businesses
  - Condominium dwellers
  - Households in crowded housing
  - Institutions
  - Institutional residents
  - Language Official language minority groups
  - Language Other than official language minority groups
  - Lone-parent families
  - Low income families
  - Near retirees
  - Persons with activity limitations / disabilities
  - Population: provincial
  - Population: other

- Recent immigrants
- Same-sex couples
- School age children
- Seniors
- Travellers to work
- Visible minorities
- Women
- Working age
- Youth
- Other, please specify.

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OR

O No

	How long after the data are collected are they sanswer only.	still useable for your needs? Please select one	
0000	For 6 months For 1 year For 2 years For 5 years For 10 years		
	How important is data comparability across the answer only.	country, or provinces/territories? Please select one	
	policy or program identified. <b>Strong need</b> implies that whill to fulfill the needs of the legislative, regulation, policy or progeographies could be used to fulfill the needs of the legislative.	ies is necessary to fulfill the needs of the legislative, regulation, e data comparability across geographies is not necessary, it is used ogram identified. <b>Some need</b> implies that data comparability across tive, regulation, policy or program identified. <b>No need</b> implies that the needs of the legislative, regulation, policy or program identified.	
•	Essential		
0	Strong need		
0	Some need No need	<i>A</i> ( ) '	
	program identified. <b>Strong need</b> implies that while data co of the legislative, regulation, policy or program identified. <b>S</b>	issary to fulfill the needs of the legislative, regulation, policy or mparability over time is not necessary, it is used to fulfill the needs some need implies that data comparability over time could be used or program identified.  No need implies that data comparability over time or program identified.	
• 0 0 0	Essential Strong need Some need No need		
	How important is it that data represent a point- be a rolling estimate. Please select <u>one</u> answe	n-time estimate, i.e., a snapshot? An alternative would r only.	
~	sample size. Rolling estimates are based on moving avera	nuous survey, which are cumulated over time to provide sufficient ges over a certain time period (e.g., one-year averages for large re-year averages for small areas). Each year, new estimates are trecent year.	
0	Essential to have point-in-time estimates (a rolli	ng estimate would not be appropriate)	
•	<ul> <li>Strong need for point-in-time estimates (a rolling estimate would likely not be appropriate)</li> </ul>		
0	No need for point-in-time estimates (a rolling es		
		aniate trouid be appropriately	

9. Describe the impact to your organization should the NHS information not be available. Please select **one** answer only.

Significant impact implies that no alternative solutions exist AND the legislation, regulation, policy or program cannot be discontinued. Moderate impact implies that alternative solutions could be found (conduct of new surveys or finding a new alternative data source) but these would result in less efficient programs (in terms of monetary allocation, allocation of services, ability to monitor a program, etc.) OR that this legislation, regulation, policy or program could be discontinued but not easily.

Minimal impact implies that alternative solutions exist (previous census or NHS data, other current surveys, or administrative data) which would be equivalent to the use of NHS data OR that this legislation, regulation, policy or program could be discontinued with relative ease.

- Significant, please explain: Considering the breadth of information collected, the sample size, and the consistency of data collection over time, there are simply no alternatives in Canada to small area data surveys that (1) allow for the ability to cross-tabulate topics for different population groups, (2) deliver reliable results at smaller levels of geography such as municipalities or neighbourhoods, and, (3) permit comparisons across geographies and over time.
- 10. Are there other data holdings, within your organization, which can provide the **same information** as census and NHS data? If yes, please list <u>all</u> that apply.

0	Yes, please list them.	
•	No	

- 11. Are there any barriers associated with accessing or limitations in using the data holdings indicated in question 10?
  - Yes, please list them.
     Considering the breadth of information collected, the sample size, and the consistency of data collection over time, there are simply no alternatives in Canada to small area data surveys that (1) allow for the ability to cross-tabulate topics for different population groups, (2) deliver reliable results at smaller levels of geography such as municipalities or neighbourhoods, and, (3) permit comparisons across geographies and over time.
  - O No