**APPENDIX 2: SERVICE PROVIDER HOUSING SURVEY (DRAFT)**

1. What kind of organization do you represent?
* Not for profit organization
* Government / Public Service
* Private Sector Organization / Business
* Volunteer group
* Charitable organization
* Faith-based organization
* Other (specify):
1. What municipalities do you serve?
* Shelburne County
	+ Municipality of Shelburne
	+ Town of Shelburne
	+ Town of Lockeport
	+ Municipality of Barrington
	+ Town of Clark’s Harbour
* Yarmouth County
	+ Municipality of Argyle
	+ Municipality of Yarmouth
	+ Town of Yarmouth
* Digby County
	+ Municipality of Digby
	+ Town of Digby
	+ Municipality of Clare
* Annapolis County
	+ Town of Annapolis
	+ Town of Middleton
	+ Municipality of Annapolis
* Kings County
	+ Municipality of Kings
	+ Town of Wolfville
	+ Town of Berwick
	+ Town of Kentville
	+ Municipality of West Hants
	+ Town of Windsor

West Hants

* Municipality of West Hants
* Town of Windsor
1. Which of the following best describes your work? (check all that apply)
* Social services
* Health services
* Disability services
* Child, Youth and Family Service
* Women Services
* Senior Services
* Emergency / protection services
* Income support / employment services
* Other (please describe)
1. To whom do you provide services? (Check all that apply)
	* Youth (25 years and under)
	* Adult (26-49 years)
	* Adult (50-64 years)
	* Seniors (65+)
	* Persons with disabilities
	* Single parents
	* Families
	* People who are experiencing homelessness
	* People living in poverty
	* People living with employment barriers
	* LGBTQ
	* Living with mental health challenges
	* Living with an addiction
	* Leaving or living in an abusive relationship
	* First nations persons (on reserve, off reserve)
	* African Nova Scotians
	* Other visible minorities
2. What % of your client base do you estimate has any type of housing problem?
* None
* about a quarter (1/4)
* about half (1/2)
* about three quarters (3/4)
* Almost all
1. What are the key housing issues or needs facing the people you support? (Check all that apply)

**Does not apply**

* The people I support do not face housing challenges or issues

**General**

* Help with medication
* Someone to check in on them once in a while
* A drive to appointments
* Help with daily living (shopping, cleaning, cooking, bathing, laundry)
* Help finding items for their apartment/house (furniture, dishes, etc)
* A need to be closer to work or services (shopping, childcare, medical services, etc)
* Help with snow removal and lawn care

**Financial**

* Help with budgeting
* Access to Legal Services (Legal aid, advice)
* A job / reliable income
* Help with damage deposits
* Help with a mortgage down payment.
* Access to a rent supplement or social housing
* Rent or mortgage is too expensive
* Utilities are too expensive
* There are not enough rentals or homes available that my clients can afford

**Housing Conditions**

* Appliances that don’t work (stove, fridge, washer, dryer)
* Lack of heating / cooling
* Not enough water for their needs
* No safe power supply
* Not connected to sewage or sewage system
* No adequate supply of safe drinking water
* No internet access
* Cannot find housing that meets their accessibility needs
* Help with MAJOR home repair (defective plumbing or electrical wiring, structural repairs of walls, floors or ceilings, etc.)
* Help with MINOR repair (defective steps, railings, or siding, loose floor tiles)
* Help with REGULAR maintenance (painting, furnace cleaning, etc)
* Too crowded
* Home is dangerous or unsafe (e.g., electrical, stairs, decking, mold)
* House is too large
* House is too small
* The lease is not stable (week to week, building is for sale, they will have to move)

**Social Connections**

* Making friends or feeling at home in the community
* Getting along with people
* Feeling safe
* Someone to call when they need help
* Being able to stay housed close to family and friends

**Getting Information**

* Help finding a place to live
* Help getting to know and trust their landlord
* Someone to help them fill out forms or apply for grants (income tax, income assistance, repair grants, medical, pension, etc)

**Additional Supports**

* Help connecting with supports they might need / referrals (Mental Heath, Addiction Services, VON, Senior Safety, Outreach, Continuing Care, etc.)
* Their safety is at risk (sexual, physical or emotional abuse)
* Help in avoiding eviction or losing their home
* Access to employment training programs
* **Other Supports** (please list): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. Have any of your clients been refused a place to live because of (Check all that apply):
* My clients have not been refused housing / does not apply
* Age
* Race or ethnicity
* Receiving social assistance (welfare)
* LGBTQ
* Unmarried, single, living common law (marital status)
* Having children
* Having a disability
* Hoarding
* Mental illness
* An addiction
* A criminal record
* Poor landlord references
* Pets
* Reputation (their name)
* Poor credit / credit check
* Other: (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. In your opinion, what are the key opportunities to meeting the housing needs of people living in our communities?
2. In your opinion, what are the key challenges to meeting the housing needs of people living in our communities?
3. Is there anything else you would like to add?