PLEASE RETURN COMPLETED SURVEYS BY
November 17, 2017

Mail completed survey’s to:
Housing Survey
Public Health Services
4th Floor Public Health
60 Vancouver Street
Yarmouth, NS
B5A 2P4

Or drop off the survey at one of the following sites for assistance:
• Local Public Health Offices
• Local Women’s Centres
• Most Municipal and Town Offices

Or call 1-877-742-0085 for assistance
We know having a safe and affordable place to live that meets your needs is important to you. Please take a few minutes to complete this survey to help us understand what your housing needs are now and into the future. The survey should take you about 15 minutes to complete.

We want your voice to be heard! We would like to hear your stories and experiences related to finding suitable housing. This information will be used to highlight the housing needs in our communities. It will also inform municipalities, builders, service providers and others about what would help people find and keep the housing they need.

All responses to the survey are anonymous and confidential. Each person living in the house is welcome to complete their own survey.

enter to win! $100

Once you finish the survey you will have the chance to enter a draw for a $100.00 gift card.

To fill out the survey online go to:

www.daashgroup.com

If you prefer to fill out this survey by phone or in person, please call 1-877-742-0085 to arrange an appointment.

If you are interested in receiving a copy of the survey results please visit any of the following sites:

http://www.daashgroup.com/

PLEASE SHARE THE SURVEY WITH OTHERS

As a thank you for taking the time to complete the survey, please provide your contact information for a chance to win 1 of 6 $100 gift cards. (OPTIONAL)

Your personal information will not be linked to your survey responses.

Name: ________________________________

Contact Information: ________________________________

DRAW DATE: DEC 1, 2017
Winner will be contacted

The Housing: Now and Into the Future survey is a project of your local housing coalitions in partnership with municipal units and interested community stakeholders.
PART A: Tell Us About Yourself

Where do you live?
(Town, County) ___________________________________________

What is your postal code?
Example: A1A 1A1
If you are unsure, write as much of your postal code as you know.
☐ I do not know my postal code / Prefer not to say

Please tell us which of the following groups you belong to:
(check all that apply)

Age group
☐ Youth (25 years and under)
☐ Adult (26-49 years)
☐ Adult (50-64 years)
☐ Senior (65+)

You are
☐ Person with a disability
☐ Single parent
☐ LGBTQ
☐ Living with mental health challenges
☐ Living with an addiction
☐ Leaving or living in an abusive relationship
☐ First Nations / Indigenous person (on reserve, off reserve)
☐ African Nova Scotian
☐ Other visible minority
☐ None of the above

Are you?
☐ Female
☐ Male
☐ Transgender Male
☐ Transgender Female
☐ Gender Variant/Non-Conforming
☐ Prefer not to say
☐ Prefer to self-describe ____________________
What is your total household income per year before taxes? Include all sources of income (EI, child tax, child support, investment income, etc)

- No Income
- Less than $10,000
- $10,000 to $19,999
- $20,000 to $29,999
- $30,000 to $39,999
- $40,000 to $49,999
- $50,000 to $59,999
- $60,000 to $69,999
- $70,000 to $79,999
- $80,000 to $89,999
- $90,000 to $99,999
- $100,000 to $149,999
- $150,000 or more
- I Don't Know
- Prefer not say

Where do you get most of your money from? (check all that apply)

- No income
- Full time job
- Part time job
- Work for myself
- Seasonal job
- Government (e.g. Income assistance-welfare, disability pension, CPP/QPP, Old Age Security, workers compensation, Employment Insurance benefits)
- Retirement Income (Pension, veterans pension, RRSPs, other )
- Financial Support from Family or Friends
- Child Support
- Canada Child Tax Benefit
- Student Loan
- Other

Please add your comments here:
If you were planning to rent (or are currently renting), what other features do you need to have included? (check all that apply)

- Not applicable / not planning to rent
- Washing machine and dryer
- Dishwasher
- Pets Allowed
- Area for gardening
- Attached garage
- High Speed Internet
- Walking paths/outdoor area
- Storage space
- Playground
- Clothesline
- Other (please specify): __________________________
  __________________________

Do you have anything else you would like to tell us about your housing?

Please add your comments here:

PART B: Tell Us About Where You Are Living

Which of the following best describes the kind of home that you live in now?

- In a house or apartment I rent
- In my own home (no mortgage)
- In my own home (with mortgage)
- In a university residence
- In supportive housing (e.g., SHYFT, Juniper House, Chrysalis House, Open Arms, Portal)
- I am sleeping rough on the street/homeless
- For now, I am living with someone else (couch surfing)
- I am living in my family’s home (i.e., rent free)
- I am boarding with family, friends or in a boarding house.
- I have another arrangement

Why are you living there? (check all that apply)

- No other options
- It’s my family home
- I’ve always lived here
- I choose to live here
- It’s safe
- It’s close to my job
- It’s close to my family and friends
- It’s close to services (shopping, medical, grocery)
- It’s all inclusive
- I could no longer do the care and maintenance of my home or did not want the responsibility
- Medical reasons
- Widowed
- None of the above
- Other (please specify): __________________________
  __________________________
How many people, counting yourself, live in your home?

- 1
- 2
- 3
- 4
- 5+
- Group housing

Do you have dependants? (check all that apply)

<table>
<thead>
<tr>
<th>Option</th>
<th>Check all that apply</th>
<th>How many?</th>
</tr>
</thead>
<tbody>
<tr>
<td>I do not have dependants living with me</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children living with me (Under 18 years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult(s) living with me that rely on me for support (18-64 years).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior(s) living with me that rely on me for support (65 years +)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Does anyone living in your home have a disability?

- YES
- NO

How do you feel about your living situation?

- Very good
- Good
- Not sure
- Not very good
- Awful

If you had to move, what kind of place would be best for you? (check all that apply)

- House (single detached home, duplex, mobile home)
- Apartment (Rental)
- Co-op
- Social Housing (Low rentals, subsidized rentals)
- Condominiums
- Independent living
- Assisted living
- Shared accommodations (Room in a house, granny suite, two people in an apartment, cooperative housing)
- Group Home (e.g., YACRO, SASI, Maison Jérôme, CLAS, L’Arche, King’s Regional Rehab Center Community Options Home))
- Senior’s Housing
- Rooming or Boarding House
- Nursing Home
- Other (please specify): __________________________

If you had to move, how many bedrooms would you need?

- 1
- 2
- 3
- 4 or more

If you were planning to rent (or are currently renting), how important is “all inclusive” (rent, electricity, water, heat, etc.)?

- Not applicable / not planning to rent
- Very Important
- Somewhat important
- Not Important
If you have recently moved or are planning to move what are the main reasons? (check all that apply)

- Does not apply
- My age
- My health
- To save money
- For my work
- To live with family or friends
- To live closer to family or friends
- To be closer medical supports (doctors’ offices or medical centers)
- To be closer to the hospital
- To be further from drugs or crime
- To be closer to school
- To be closer to services (recreational facilities, grocery stores, child care, pharmacy)
- To be in a safe place to live
- To get away from sexual, physical or emotional abuse
- I require more accessible housing
- Access to high speed internet
- The place I am living in is no longer available
- I was or am going to be evicted
- Other

If at one point you had to move, how important is it for you to stay close to where you live now?

- Very Important
- Somewhat important
- Not important

This is a list of things that people say they like or dislike about where they live. Thinking about where you are living, please tell us how you feel about the following:

<table>
<thead>
<tr>
<th>Satisfied</th>
<th>Neither</th>
<th>Unsatisfied</th>
<th>Very Unsatisfied</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

The amount of room or space you have

The condition (need for maintenance or repair)

Its location

The people you live with

The manager (landlady, landlord, superintendent)

The amount of privacy

The distance from services (stores, medical, grocery, laundry)

The price or cost

Safety

How accessible it is for your needs

Getting where you need to go (transportation)

Neighbourhood

How much do you pay for rent/mortgage/boarding each month?

Does not apply

Rent: $

Mortgage: $

Boarding: $
Roughly, how much are heat, electricity, and water each month?

- Does not apply
- Everything is included in what I pay
- Heat $________
- Electricity $________
- Heat and electricity are one bill $________
- Water (if you pay for it) $________

Roughly, how much are property taxes per year?

- $________
- I do not have property taxes

Does someone else (not living with you) help you pay your rent or mortgage in order for you to afford it?

- YES
- NO

Does someone else (not living with you) help you pay for food, oil, heat, etc in order for you to afford your rent or mortgage?

- YES
- NO

Are you sharing your house or apartment with someone else in order for you to afford it?

- YES
- NO

In your home, do you have: (check all that apply)

- Stove that works
- Fridge that works
- Washer that works
- Dryer that works
- Enough heat to keep you warm
- A way to cool your home down
- Enough hot water for your needs
- A safe power supply
- A connection to sewage/ sewage system
- Enough water for your needs
- Safe drinking water
- Internet access

Additional Supports

- Help connecting with support I might need (Mental Health, Addiction Services, VON, Senior Safety, Outreach, Continuing Care)
- Help to avoid getting evicted or losing my home
- Access to employment training programs
- Other Supports (please list): ____________________________________________

Please tell us about the condition of your home. (check all that apply)

- My home requires major repair (defective plumbing or electrical wiring, structural repairs to walls, floors or ceilings, etc.)
- My home requires minor repair (defective steps, railing, or siding, loose floor tiles, etc)
- My home requires regular maintenance (painting, furnace cleaning, etc)
- Does not apply

PART D: Tell Us About Where You Would Like To Live In The Future

If you are planning to move, when would that be?

- I am not planning to move
- I am looking for a place to live right now
- In less than 1 year
- In 1 to 5 years
- In 5 or more years

If you were planning to move, what community would you like to move to?
Sometimes a person might have trouble finding a suitable place to live and being able to stay there. If this has happened to you, please tell us if there are any services or supports on this list that would have made it easier for you to find a suitable place and/or to stay. (check all that apply)

Does not apply
- This has not happened to me

General
- Help with my medication
- Someone to check in on me once in a while
- A drive to appointments
- Help with daily living (shopping, cleaning, cooking, bathing, laundry)
- Help finding what I need for my apartment/house (furniture, dishes)
- Being closer to services or work

Financial
- Being able to pay my bills
- Help with budgeting
- Legal Services (Legal aid, advice)
- A job / reliable income
- Help with damage deposits
- Help with a mortgage down payment.
- A rent supplement

Social Connections
- Making friends or feeling at home in the community
- Getting along with people
- Feeling safe
- Someone to call when I need help

Getting Information
- Help finding a place to live
- Help getting to know and trust my landlord
- Someone to help me fill out forms or apply for grants (income tax, income assistance, repair grants, medical, pension, etc.)

PART C: Tell Us About Your Housing Needs

Tell us about finding housing that meets your needs? It has been...

Please tell us if there is anything on this list that makes it hard for you to stay where you are or to find housing. (check all that apply)

- I have not had difficulty finding suitable housing

Availability
- I can’t find a suitable place to rent
- I can’t find a suitable house to buy
- There are not enough rentals available that I can afford.
- There are not enough homes for sale that I can afford.
- There isn’t enough of the kind of housing I need (accessible, seniors, co-op, assisted living, subsidized, etc)

Financial
- Rent is too expensive
- Heat, lights are too expensive
- Don’t have enough money for a down payment on a house.
- Don’t have enough money for house repairs
- I would like to own a home, but I can’t get a mortgage
- Finding housing that is both accessible for my disability and that I can pay for
- My property taxes keep going up
General
○ My house needs a lot of repairs I can’t afford
○ I don’t like the neighborhood
○ It’s hard for me to get a drive to where I need to go
○ Too crowded
○ Too small
○ Too large
○ Too many stairs
○ My lease is not stable (week to week, month to month, building is for sale, I will have to move)

Other (please specify): ____________________________________________

I have been refused a place to live because of: (check all that apply)
○ Does not apply
○ My age
○ My race or ethnicity
○ I am receiving social assistance (welfare)
○ I am LGBTQ
○ I am unmarried, single, living common law (marital status)
○ I have children
○ I have a disability
○ I hoard
○ I have a mental illness
○ I have an addiction
○ I have a criminal record
○ I have poor landlord references
○ I have pets
○ My reputation (your name)
○ Other (please specify): __________________________________________

Thinking about the next couple of years, can you keep living where you are or will you have to move?
○ Yes, I can stay where I am
○ No, I will have to move
○ Not sure

If you need safety and accessibility features, what would they be?
○ I don’t need any
○ I need a fully accessible unit (low light switches, roll under stove, wall oven, low cupboards, roll in shower, ramps, wide hallways, one level)
○ I need a few features (e.g., bath bars, ramps, wide hallways, life line) (check all that apply)
  Bathroom Features
  ○ Bathroom large enough for a wheelchair or walker
  ○ Grab bars (shower, tub or toilet)
  ○ Walk or roll in shower (with seat or for a wheelchair)
  Design Features
  ○ One-story (bedroom room on 1st floor)
  ○ Minimal step up to get into house/apartment
  ○ Wide hallways and doorways
  ○ Ramp
  Safety Features
  ○ Room for a caregiver
  ○ Life line system
  ○ Security System

What other supports do you need in order to stay in your home? (check all that apply)
○ I do not need other supports
○ Help with daily living (shopping, cleaning, cooking)
○ A drive to do errands or get to appointments (transportation)
○ Snow removal and lawn care
○ A chance to get out and be around people
○ Being close to childcare
○ Being close to family or friends
○ Help with basic home repair
○ Other (please specify): __________________________________________
  __________________________________________
