PLEASE RETURN COMPLETED SURVEYS BY

November 17, 2017

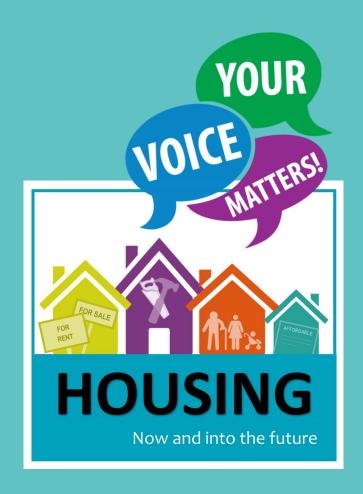
Mail completed survey's to:

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



HOUSING SURVEY
PAPER COPY



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.



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.

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.

AN INITIATIVE OF OUR LOCAL HOUSING COALITIONS AND STAKEHOLDERS









any of the following sites:
http://www.daashgroup.com/

If you are interested in receiving a copy of the survey results please visit

https://www.facebook.com/Safe-Affordable-Housing-in-the-Tri-Counties-1751746625068075/

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.

enter to win!

Name:		
Contact Information:		

DRAW DATE: DEC 1, 2017 Winner will be contacted

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thank you!

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 you postal code as you know. O 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+)
ou are
Person with a disabilitySingle parentLGBTQ
O Living with mental health challenges
Living with an addiction
Leaving or living in an abusive relationship
O First Nations / Indigenous person (on reserve, off reserve)
O African Nova Scotian
Other visible minority
O None of the above
Are you?
○ Female
○ Male
Transgender Male
Transgender Wale Transgender Female
Gender Variant/Non-Conforming
O Prefer not to say
O Prefer to self-describe

What is your total <u>household</u> income per year <u>before taxes</u> ? Include all sources of income (EI, child tax, child support, investment income, etc)	Please add your comments here:
○ 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	
O Work for myself	
○ Seasonal job	
 Government (e.g. Income assistance-welfare, disability pension, CPP/QPP, Old Age Security, workers compensation, Employment Insurance benefits) 	
O Retirement Income (Pension, veterans pension, RRSPs, other)	
O Financial Support from Family or Friends	
○ Child Support	
○ Canada Child Tax Benefit	
○ Student Loan	
○ Other	

If you were planning to rent (or are currently renting), what other features do you need to have included? (check all that apply) O Not applicable / not planning to rent O Washing machine and dryer O Dishwasher O Pets Allowed O Area for gardening O Attached garage O High Speed Internet O Walking paths/outdoor area O Storage space O 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)
\bigcirc In my own home (with mortgage)
O In a university residence
O In supportive housing (e.g., SHYFT, Juniper House, Chrysalis House,
Open Arms, Portal)
\bigcirc I am sleeping rough on the street/homeless
\bigcirc For now, I am living with someone else (couch surfing)
○ I am living in my family's home (i.e., rent free)
\bigcirc I am boarding with family, friends or in a boarding house.
○ I have another arrangement
Why are you living there? (check all that apply)
O No other options
O It's my family home
O I've always lived here
○ I choose to live here
○ It's safe
○ It's close to my job
O It's close to my family and friends
 It's close to services (shopping, medical, grocery)
○ It's all inclusive
$\ensuremath{\bigcirc}$ I could no longer do the care and maintenance of my home or did
not want the responsibility
O Medical reasons
○ Widowed
O None of the above
Other (please specify):

How many people, counting yourself, live in your home?			If you had to move, what kind of place would be best for you? (check all		
O 1			that apply)		
○ 2			O House (single detached home, duplex, mobile home)		
○ 3			Apartment (Rental)		
O 4			○ Со-ор		
○ 5+			Social Housing (Low rentals, subsidized rentals)		
O Group housing			○ Condominiums		
			O Independent living		
Do you have dependants? (check all that apply)			○ Assisted living		
	Check all that	How many?	 Shared accommodations (Room in a house, granny suite, two people in an apartment, cooperative housing) 		
	apply		 Group Home (e.g., YACRO, SASI, Maison Jérôme, CLAS, L'Arche, King' Regional Rehab Center Community Options Home)) 		
I do not have dependants living with me			○ Senior's Housing		
Children living with me (Under 18 years)	0		O Rooming or Boarding House		
Adult(a) living with man that value as was foun			O Nursing Home		
Adult(s) living with me that rely on me for support (18-64 years).	0		Other (please specify):		
Senior(s) living with me that rely on me	0				
for support (65 years +)			If you had to move, how many bedrooms would you need?		
			O 1		
			○ 2		
oes anyone living in your home have a dis	ability?		○ 3		
○ YES ○ NO			O 4 or more		
ONO					
ow do you feel about your living situation	?		If you were planning to rent (or are currently renting), how important is "all inclusive" (rent, electricity, water, heat, etc.)?		
Very good Good Not sure	Not very good	Awful	O Not applicable / not planning to rent		
			O Very Important		
			○ Somewhat important		
0 0 0	0	0	O Not Important		

If you have recently moved or are planning to move what are the main reasons? (check all that apply)	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						
O Does not apply	about the following:						
○ My age		(1)	(1)	(1)	(1)	(:)	
O My health		Very			<u> </u>	Very	Not
○ To save money		satisfied	Satisfied	Neither	Unsatisfied	Unsatisfied	Applica
○ For my work	The amount of room or space you have	0	0	0	0	0	0
○ To live with family or friends							
\bigcirc To live closer to family or friends	The condition (need for maintenance or repair	0	0	0	0	0	0
To be closer medical supports (doctors' offices or medical centers)To be closer to the hospital	Its location						
	The people you live with	0	0	0	0	0	0
O To be further from drugs or crime	The manager (landlady,						
○ To be closer to school	landlord, superintendent)	0	0	0	0	0	0
O To be closer to services (recreational facilities, grocery stores, child	The amount of privacy	0	0	0	0	0	0
care, pharmacy) ○ To be in a safe place to live	The distance from services (stores, medical, grocery,						
○ To get away from sexual, physical or emotional abuse	laundry)						
O I require more accessible housing	The price or cost	0	0	0	0	0	0
Access to high speed internet	Safety	0	0	0	0	0	0
O The place I am living in is no longer available	How accessible it is for your needs	0	0	0	0	0	0
I was or am going to be evictedOther	Getting where you need to go (transportation)	0	0	0	0	0	0
	Neighbourhood	0	0	0	0	0	0
If at one point you had to move, how important is it for you to stay close to where you live now?	How much do you pay for re		tgage/bo	parding	each <u>mo</u>	nth?	
○ Very Important	Does not apply)					
○ Somewhat important	Rent: \$						
O Not important	Mortgage : \$						

Boarding: \$

Not Applicable

 \circ

0

0

0

Roughly, how much are heat, electric	ity, and water <u>each month</u> ?	Additional Supports			
Does not apply	0	Help connecting with support I might need (Mental Heath, Addiction)			
Everything is included in what I	pav O	Services, VON, Senior Safety, Outreach, Continuing Care)			
Heat \$		 Help to avoid getting evicted or losing my home 			
•		Access to employment training programs			
Electricity \$		Other Supports (please list):			
Heat and electricity are one bill	\$	· · · · · · · · · · · · · · · · · · ·			
Water (if you pay for it) \$					
Roughly, how much are property taxe	es per vear?	 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) 			
0\$					
O I do not have property taxes	ou) hala was na was na mant an				
Does someone else (not living with yo mortgage in order for you to afford it		My home requires regular maintenance (painting, furnace cleaning, etc)Does not apply			
O YES	•				
O NO					
Does someone else (not living with your rerorder for you to afford your rerorders		PART D: Tell Us About Where You Would Like To Live In The Future			
O NO		If you are planning to move, when would that be?			
Are you sharing your house or apartn	agent with company also in order for	○ I am not planning to move			
ou to afford it?	ient with someone eise in order for	○ I am looking for a place to live right now			
○ YES		O In less than 1 year			
\bigcirc NO		○ In 1 to 5 years			
		○ In 5 or more years			
n your home, do you have: (check all	that apply)	, and the second			
○ Stove that works	○ Enough hot water for your needs	If you were planning to move, what community would you like to move			
○ Fridge that works ○ A safe power supply		to?			
O Washer that works	\bigcirc A connection to sewage/ sewage				
O Dryer that works	system				
○ Enough heat to keep you warm	O Enough water for your needs				
O A way to cool your home down	○ Safe drinking water				
(windows that open, air conditioner)	○ Internet access				

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

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

Financial

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

Social Connections

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

Getting Information

- O Help finding a place to live
- O Help getting to know and trust my landlord
- O 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...

Very easy	Easy	Neutral	Difficult	Very difficult
very easy	Lusy	Neutrai	Dimedic	very difficult
(\cdot)		()	(
0	0	0	0	0

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)

O I have not had difficulty finding suitable housing

Availability

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

Financial

- O Rent is too expensive
- Heat, lights are too expensive
- O Don't have enough money for a down payment on a house.
- O Don't have enough money for house repairs
- O I would like to own a home, but I can't get a mortgage
- O Finding housing that is both accessible for my disability and that I can pay for
- O My property taxes keep going up

General	If you need safety and accessibility features, what would they be?				
O My house needs a lot of repairs I can't afford	○ I don't need any				
I don't like the neighborhoodIt's hard for me to get a drive to where I need to go	 I need a fully accessible unit (low light switches, roll under stove, wall oven, low cupboards, roll in shower, ramps, wide hallways, one level) 				
○ Too crowded○ Too small	 I need a few features (e.g., bath bars, ramps, wide hallways, life line) (check all that apply) 				
○ Too large	Bathroom Features ○ Bathroom large enough for a wheel chair or walker ○ Grab bars (shower, tub or toilet)				
○ Too many stairs					
O My lease is not stable (week to week, month to month, building is					
for sale, I will have to move)	Walk or roll in shower (with seat or for a wheelchair)				
Other (please specify):	Design Features				
	One-story (bedroom room on 1st floor)				
I have been refused a place to live because of: (check all that apply)	, ,				
O Does not apply	O Minimal step up to get into house/apartment				
○ My age	 Wide hallways and doorways 				
O My race or ethnicity	○ Ramp				
○ I am receiving social assistance (welfare)	Safety Features				
○ I am LGBTQ	O Room for a caregiver				
○ I am unmarried, single, living common law (marital status)	O Life line system				
○ I have children	○ Security System				
○ I have a disability	Security System				
○ I hoard	What all an arrange do not need in and on to also in a contract 2 (sheet).				
O I have a mental illness	What other supports do you need in order to stay in your home? (check all that apply)				
○ I have an addiction					
○ I have a criminal record	O I do not need other supports				
O I have poor landlord references	Help with daily living (shopping, cleaning, cooking)				
○ I have pets	○ A drive to do errands or get to appointments (transportation)				
O My reputation (your name)	O Snow removal and lawn care				
Other (please specify):	\bigcirc A chance to get out and be around people				
The lates of the state of the s	O Being close to childcare				
Thinking about the next couple of years, can you keep living where you are or will you have to move?	O Being close to family or friends				
•	O Help with basic home repair				
O Yes, I can stay where I am	Other (please specify):				
O No, I will have to move					
○ Not sure					