

Safe Shelters Community Survey (revised)

Welcome to our community survey about access to safe, gender-sensitive shelters.

This survey is for people who:

- experienced or came close to experiencing homelessness
- stayed, or tried to stay, at a shelter or transition house
- couch surfed, or stayed in a crowded, unhealthy, or unsafe situation, to avoid going to a shelter or being homeless
- are a peer, community worker, or advocate who assist people in the situations above.

The survey was co-designed by West Coast LEAF, SNOW, and people with experience of shelters in the Peace region.

We especially welcome responses from women (cis and trans), trans people of all genders, Two-Spirit and non-binary people, and people of diverse genders.

West Coast LEAF and SNOW will use survey responses to advocate to government, and make a human rights submission about access to safe, gender-sensitive shelters.

The survey has 14 question areas and will take 15-25 minutes.

At the end of the survey, participants can receive a \$XX cash honorarium as compensation for your valuable time and knowledge.

Additional Survey and Privacy Information:

This survey is anonymous. Please don't provide any information that identifies you or others. If you have questions or concerns about this survey, please email research@westcoastleaf.org.

Possible risks: Survey results will be used to advocate. It is possible that some people or service providers may act negatively towards our survey findings and towards anyone they think participated. To decrease these risks for everyone, please keep your participation and responses private.

Content warning: some survey questions ask about difficult topics like: unsafe living situations, and separation from children or pets. We have listed supports on the back of this page (p. 2) in case you need them.

Your participation is completely voluntary and you are free at any time to: stop participating, pause and come back, or skip any question.

If you prefer to complete this survey by phone, please call [XXX-XXX-XXXX].

After you complete the survey, please seal it in the envelope provided. Then, return it to SNOW's peer survey team (who gave you the survey). They will arrange for your \$XX honorarium.

Thank you! If you agree to continue, please begin the survey (page 3).



Contact Information for Free Mental Health Supports

BC-wide 310Mental Health Support Line: 310-6789 (no need to dial area code)

Northern BC 24-Hour Crisis Line, Youth Support Line, Youth Online Chat:

Crisis Lines: 250-563-1214 / 1-888-562-1214

Youth Line: 250-564-8336 / 1-888-564-8336

Crisis Chat: crisis-centre.ca

KUU-US Crisis Line Society: 1-800-588-8717

(24-Hour toll free First Nations and Indigenous specific crisis line)

For support from a local counsellor in Fort St. John, you can call [Name, XXX-XXX-XXXX]

Access to Shelters in Your Local Community

These questions ask about the community where you currently live.

1. To begin, in what community do you currently live?

Name of community, city, or town	Neighbourhood (optional)

2. Thinking about all shelters in your community, how much do you agree or disagree with the following:

	Strongly agree	Agree	Disagree	Strongly disagree	Not sure
There are enough shelter spaces to meet community needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter locations are easy to reach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is easy to learn which shelters have beds available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Thinking about all shelters in your community, are there enough shelter spaces that meet the needs of...

	Usually	Sometimes	Rarely	Not sure
Women (cisgender and transgender)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People leaving violent situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are Two-Spirit, trans, or non-binary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who use alcohol or drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with mental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with disabilities or physical health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Couples	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with pets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seniors and Elders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Flip page over.]

4. Is there anything else you think we should know about the number and types of shelter spaces in your community?

Names of Shelters in Your Current Community

5. Please list shelters in your community. Check if you have stayed at, visited, or contacted the shelter.

(Skip rows you don't need.)

Shelter names will not be shared. They will be used to count how many shelters are covered in this survey.

Name of Shelter/Operator	Stayed	Visited	Contacted (called or messaged)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Names of Shelters in Other Communities

6. If you have experience with shelters outside your community, please list them. Check if you have stayed at, visited, or contacted the shelter.

(Skip rows you don't need)

Shelter names will not be shared. They will be used to count how many shelters are covered in this survey.

Name of Shelter	Community	Stayed	Visited	Contacted (called or messaged)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Accessibility of Shelters

Please think about shelters where you tried to get a bed (for yourself or someone else).

(If you have never contacted a shelter to try to get a bed, skip to question 8 on page 7.)

Barriers

7a. Thinking about shelters you contacted in the past 5 years, how often did you encounter these barriers:

	Usually	Sometimes	Rarely	Does not apply in my situation
Could not bring pets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was not allowed in past curfew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turned away with no help finding other services that could help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There was no bed available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A bed was available, but it was not safe / did not meet needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Could not stay together with partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not allowed to bring kids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Could not bring belongings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter had unfair or discriminatory rules about who could stay*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If you encountered unfair rules about who could stay, please describe:

[Flip page over.]

Barriers by Shelter Type

7b. How often did you encounter barriers at these different types of shelters:

(If you've never contacted that type of shelter, check "Have not been / contacted.")

	Usually Barriers	Sometimes Barriers	Rarely Barriers	Have not been / contacted
Co-ed shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Women's Shelter or Transition House	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men's Shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other type of shelter (please describe):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barriers: Open Comment

7c. Is there anything else you feel we should know about shelter access barriers you've experienced or observed?

[Continue to the next page.]

Experience Staying at or Visiting Shelters

8. Please think about shelters where you stayed, or visited to help someone in the past 5 years.

(If you have never visited or stayed at a shelter, skip to question 9 on page 9.)

Standards for Shelters

8a. Thinking about shelters where you stayed or visited in the past 5 years, how often did shelters meet these standards:

	Usually	Sometimes	Rarely	Don't know
Shelter provided access to harm reduction supplies and overdose prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter rules were fair and didn't discriminate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residents could stay as long as needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter offered access to counselling and supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter was supportive for people who had experienced violence or abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residents were involved in deciding shelter rules and policies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter treated residents with respect and dignity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter was clean and well maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter practices ensured residents' safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter practices ensured residents' privacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelter had good measures to safely handle mental health crises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Flip page over.]

Conditions by Shelter Type

8b. In general, how would you describe conditions at these different types of shelters:

(If you've never been to that type of shelter, check "Have not been.")

	Very good	Good	Poor	Very poor	Have not been
Co-ed shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Women's Shelter or Transition House	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men's Shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other type of shelter (please describe):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conditions: Open Comment

8c. Is there anything else you feel we should know about shelter conditions you've experienced or observed?

[Continue to the next page.]

Impacts of Not having Access to Safe Shelter

Not having access to safe emergency shelters or housing can cause negative impacts for people. **If you feel comfortable, please identify which impacts you have seen or personally experienced.**

Your answers are important because they will help us push Canada's and BC's governments to make sure everyone can access safe shelter if they need it.

Some of the topics below may be difficult to think about. If you need support, please see page 2 for free crisis supports you can call. You can also skip any question you don't wish to answer.

9a. Because of not having access to a safe shelter space, _____ happened:

Check all that apply.

	Personally experienced	Helped someone who experienced	No comment
Had to couch surf or stay in a crowded situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stayed somewhere unhealthy, or unsafe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stayed in unwanted or bad relationship to keep housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did survival sex work, or traded sex for housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stayed outside, in a tent, or in a vehicle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worried about separation from kids due to no safe shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used substances to cope with stress of no safe shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had mental or physical health issues because of no safe shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had to leave own community to find safe shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had to sleep separate from partner to access shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stayed in a jail, hospital, or institution because of no shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Became separated from a pet to access shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Became separated from kids because of no safe shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for sharing about these difficult situations. Your experiences are important because they help us to make strong calls for change.

[Flip page over.]

9b. Is there anything else you feel we should know about the impacts of not having access to safe shelter spaces?

Thank you again for sharing about these difficult situations, and speaking out to make change!

On the last page, we'll ask about your ideas for solutions and actions the government should take to make sure everyone can access safe shelters if they need to.

[Continue to the next page.]

About You

This information will be grouped together, so no one can be identified. It helps us understand if some groups of people (for example, seniors or women) had similar experiences.

Responses are private and confidential.

10a. How old are you? Check one answer only.

- Under 19 25 to 34 yrs 45 to 54 yrs 65 yrs or older
 19 to 24 yrs 35 to 44 yrs 55 to 64 yrs Prefer not to say

10b. How do you identify? Check one answer only.

- Man Non-binary or gender fluid I am (please specify): _____
 Woman Two-Spirit, or another
Indigenous or cultural gender Prefer not to say

10c. Do you identify as trans* or someone with trans experience?

* in this survey, trans means that your gender identity does not align with the sex assigned to you at birth.

- Yes No Prefer not to say

10d. Do you identify as First Nations, Metis or Inuit? Check one answer only.

- First Nations Metis Inuit No Prefer not to say
 Other Indigenous identity (please specify): _____

10e. Which of the following describes you? Check one answer only.

- White, European descent, Caucasian or similar Mixed race, biracial, multiracial Prefer not to say
 Person of colour, visible minority, BIPOC Other (please specify): _____

10f. Is there anything else about you or your situation you feel we should know, to help us better understand your experiences with shelters?

[flip page over]

Your Experience Helping Others

Were some of your survey responses based on your experience helping others with housing issues?
(This could be as a friend, peer, advocate, or community worker.)

11g. IF YES, please share which groups you usually / mainly help with housing issues:

(If NO, you can skip to the next page.)

- | | | | |
|---------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Children (0-12 yrs) | <input type="checkbox"/> Women, including trans women | <input type="checkbox"/> Sex workers | <input type="checkbox"/> Other workers |
| <input type="checkbox"/> Youth (13-18 yrs) | <input type="checkbox"/> Men, including trans men | <input type="checkbox"/> People with mental health challenges | |
| <input type="checkbox"/> Young adults (18-30 yrs) | <input type="checkbox"/> 2S-LGBTQAI+ people | <input type="checkbox"/> People with intellectual disabilities | |
| <input type="checkbox"/> Older adults (65+ yrs) | <input type="checkbox"/> Non-binary & gender-diverse people | <input type="checkbox"/> People who use alcohol or drugs | |
| <input type="checkbox"/> Parents and caregivers | <input type="checkbox"/> People with physical disabilities or chronic illness | | |
| <input type="checkbox"/> Racialized people | <input type="checkbox"/> People who are incarcerated or have faced arrest in the criminal justice system | | |
| <input type="checkbox"/> Immigrants and refugees | <input type="checkbox"/> People who have experienced gender-based and/or family violence and/or abuse | | |
| <input type="checkbox"/> Indigenous Peoples | <input type="checkbox"/> Another group (please describe): _____ | | |

Is there anything else you feel we should know about your role or the groups of people you usually assist?

[Continue to the next page.]

Solutions

12a. Thinking about actions that governments should take, how important are these possible solutions?

	Very Important	Important	Less Important	Not sure
Build and fund enough 24/7 shelters and safe spaces to meet all communities' needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Create and monitor gender-sensitive human rights standards for shelters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Create shelter monitoring committees of people with lived experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hire independent advocates for shelter residents.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure shelter spaces (e.g., sleeping spaces, storage, and bathrooms) are safe, secure, and private.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure shelter residents have input into gender-sensitive shelter design, rules and policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure shelter staff are trained in trauma-informed and violence-informed practice, de-escalation, and mental health first aid.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hire peer navigators and people with lived experience to work at shelters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure shelters offer wrap-around services like sexual assault services, harm reduction, counselling, and overdose prevention.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure shelters offer access to Wifi.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure shelters do not discriminate (based on e.g., gender, race, Indigenous identity, substances, or mental health).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fund enough shelters that are culturally safe for Indigenous people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure enough dedicated 24/7 spaces for people at risk of violence, or leaving violence – including people with children and pets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure no one can be reported to MCFD because they brought a child to a shelter.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fund pathways out of shelters into stable housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12b. Please share any other comments about solutions you would like to see:

[Flip page over to finish.]

Experiences Contacting Other Services for Housing Help

13. Have you contacted services other than shelters for help with housing? Yes No

If YES, please list some services you contacted, and briefly describe if they were helpful or not helpful:

Anything else?

14. Is there anything else you want to share about shelters, homelessness, or housing rights? We are especially interested to hear about experiences or issues that are important for women, parents and caregivers, and gender diverse people.

Please hand in your survey!

After you complete the survey, please seal it in the envelope provided.

(If you want, you can keep page 1 for your own information.)

Return your survey in the sealed envelope to a member of SNOW's peer survey team (who gave you the survey). They will arrange for your \$XX honorarium.

You can also sign up to hear about our survey findings (in early 2024).

Note: because your responses are anonymous, after you hand in your survey, we will not be able to withdraw your information.

Thank you!