| Your answers to the following survey by questions will help us understand how we can better meet the needs of people who are homeless in Volusia County. This survey is voluntary. You may choose not to answer some questions. You may also stop answering at any time. Your answers will not affect the services available to you roy rour family, even if you do not answer at all. Your answers will not affect the services available to you for pour family, even if you do not answer at all. Your answers will not affect the services available to you roy rour family, even if you do not answer at all. Your answers will not affect the services available to you roy our formations. Thank you for a same and all initial is all the provided and th | VFCoC: Volusia County 2015 Annual Survey Volunteer Name: | | | | | |
|--|---|---------------------|---------------------|-------------------------------------|--|--|
| people who are homeless in Volusia County. This survey is voluntary. You may choose not to answer some questions. You may also stop answering at any time. Your answers will not affect the services available to you or your family, even if you do not answer at all. Your answers will not be shared with anyone. Thank you for taking a few moments to help us. SECTION A. Ask if individual is willing to answer these questions: 1. Have you completed this survey earlier today or this week? □ Yes □ No 2. Please tell us your first name and last initial: 3. What is your date of birth? Month □ay Year 4. Are you a veteran? Have you ever served on active duty in the U.S. millitary? *If yes, give veteran the Salvation Army Card. □ Yes □ No 5. Do you have a regular place to stay right now? □ Yes □ No 5. Do you have a regular place to stay right now? □ Yes □ No 5. Do you have a regular place to stay right now? □ Yes □ No 5. Where did you stay last night? □ Emergency shelter, include □ Transitional Housing for □ Homeless □ Substance abuse treatment □ Refused □ Refused □ Salva with friend □ No □ N | Date: | Time: | Time: Location: | | | |
| 2. Please tell us your first name and last initial: 3. What is your date of birth? | Your answers to the following survey by questions will help us understand how we can better meet the needs of people who are homeless in Volusia County. This survey is voluntary. You may choose not to answer some questions. You may also stop answering at any time. Your answers will not affect the services available to you or your family, even if you do not answer at all. Your answers will not be shared with anyone. Thank you for taking a few moments to help us. | | | | | |
| 2. Please tell us your first name and last initial: 3. What is your date of birth? | | | | | | |
| 3. What is your date of birth? Month Day Year 4. Are you a veteran? Have you ever served on active duty in the U.S. military? *If yes, give veteran the Salvation Army Card. | | | | | | |
| 4. Are you a veteran? Have you ever served on active duty in the U.S. military? *ff yes, give veteran the Salvation Army Card. | | | Day | Year | | |
| 5. Do you have a regular place to stay right now? . Yes oldown No 5a. Would you describe yourself as being homeless? If no, do not complete survey. If yes, ask: Where did you stay last night? I Emergency shelter, include motel voucher Homeless | | | | .S. military? *If yes, give veteran | | |
| 5. Do you have a regular place to stay right now? 1 Yes 0 No 5a. Would you describe yourself as being homeless? If no, do not complete survey. If yes, ask: Where did you stay last night? 1 Emergency shelter, include notel voucher Homeless homeless homeless, which you describe yourself as being homeless? If no, do not complete survey. If yes, ask: Where did you stay last night? 1 Emergency shelter, include notel voucher Homeless homeless, which you homeless, | - | | | | | |
| 5a. Would you describe yourself as being homeless? If no, do not complete survey. If yes, ask: Where did you stay last night? ¹□ Emergency shelter, include motel voucher □ Psychiatric facility ¹□ Jail, prison, detention facility □ Place not meant for habitation facility □ Psychiatric facility □ Jail, prison, detention facility □ Place not meant for habitation facility □ Place not meant for habitatio | ₁□ Yes ₀□ | No | | | | |
| 5a. Would you describe yourself as being homeless? If no, do not complete survey. If yes, ask: Where did you stay last night? ¹□ Emergency shelter, include motel voucher □ Psychiatric facility ¹□ Jail, prison, detention facility □ Place not meant for habitation facility □ Psychiatric facility □ Jail, prison, detention facility □ Place not meant for habitation facility □ Place not meant for habitatio | 5. Do you have a regular place to | stav right now? | ₁□ Yes | ₀□ No | | |
| Transitional Housing for homeless, | | | | - | | |
| motel voucher d□ Psychiatric facility d□ Jail, prison, detention facility d□ Room, apartment, house rented d□ Stay with friend facility faci | Where did you stay last night? | | | | | |
| #☐ Psychiatric facility #☐ Psychiatric facility #☐ Jail, prison, detention facility #☐ Room, apartment, house rented #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Place not meant for habitation (car, street, boat) #☐ Emergency shelter, include motel voucher #☐ Psychiatric facility #☐ Jail, prison, detention facility #☐ Don't know #☐ Apartment or house owned #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Don't know #☐ Don't know #☐ Don't know #☐ Room, apartment, house #☐ Room, apartment, house #☐ Room, apartment, house #☐ Room, apartment, house #☐ Place not meant for habitation (car, street, boat) #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Place not meant for habitation (car, street, boat) #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Place not meant for habitation (car, street, boat) #☐ Hotel/motel paid for by self #☐ Hotel/motel paid for by self #☐ Place not meant for habitation (car, street, boat) #☐ Hotel/motel paid for by self #☐ Hotel/motel paid for by self #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Place not meant for habitation (car, street, boat) #☐ Hotel/motel paid for by self #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Place not meant for habitation (car, street, boat) #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Hotel/motel paid for by self #☐ Foster care home #☐ Hotel/motel paid for by self #☐ Foster care home | ₁☐ Emergency shelter, include | ₂☐ Transitional Ho | ousing for | ₃☐ Permanent housing for | | |
| facility | | | | | | |
| 7□ Jail, prison, detention facility 10□ Room, apartment, house rented 13□ Stay with friend 14□ Hotel/motel paid for by self 15□ Foster care home 16□ Place not meant for habitation (car, street, boat) (If Jail/Prison, Hospital or Treatment Facility is checked above, ask the following question - OTHERWISE SKIP TO QUESTION 6): 5b. Where were you staying right before you came to that place? 15□ Emergency shelter, include motel voucher Homeless 15□ Permanent housing for Homeless 15□ Permanent housing for Homeless 15□ Hospital 15□ Permanent housing for Homeless 15□ Perman | 4 Psychiatric facility | | se treatment | €⊔ Hospitai | | |
| Apartment or house owned rented Apartment or house owned rented Apartment or house owned rented Apartment or house owned rented Apartment or house owned rented Apartment or house owned Apartment or house Apartment or house Apartment or house Apartment or house Apartment | ₇ □ Jail, prison, detention | | | ₀ □ Refused | | |
| rented Stay with friend Stay with friend Stay with friend Hotel/motel paid for by self Is Foster care home | • | | | D Olaves 111. Com 11 | | |
| 13 Stay with friend 14 Hotel/motel paid for by self 15 Place not meant for habitation 17 Other: | | ₁₁⊔ Apartment or n | ouse owned | 12 Stay with family member | | |
| (car, street, boat) (If Jail/Prison, Hospital or Treatment Facility is checked above, ask the following question - OTHERWISE SKIP TO QUESTION 6): 5b. Where were you staying right before you came to that place? □ Emergency shelter, include □ Transitional Housing for □ Homeless □ Psychiatric facility □ Jail, prison, detention □ facility □ Jail, prison, detention □ facility □ Jail, prison, detention □ Substance abuse □ Don't know □ Don't know □ Refused □ Refused □ Room, apartment, house □ rented □ Stay with friend □ Hotel/motel paid for by self □ Place not meant for habitation □ (car, street, boat) 5. How long since you last had a regular place to stay? □ 1 week or less □ 2 More than 1 week, but less than 1 month □ 3 1 to 3 months | 13 ☐ Stay with friend | ₁₄□ Hotel/motel pai | d for by self | ₁₅ロ Foster care home | | |
| (car, street, boat) (If Jail/Prison, Hospital or Treatment Facility is checked above, ask the following question - OTHERWISE SKIP TO QUESTION 6): 5b. Where were you staying right before you came to that place? □ Emergency shelter, include □ Transitional Housing for □ Homeless □ Psychiatric facility □ Jail, prison, detention □ facility □ Jail, prison, detention □ facility □ Jail, prison, detention □ Substance abuse □ Don't know □ Don't know □ Refused □ Refused □ Room, apartment, house □ rented □ Stay with friend □ Hotel/motel paid for by self □ Place not meant for habitation □ (car, street, boat) 5. How long since you last had a regular place to stay? □ 1 week or less □ 2 More than 1 week, but less than 1 month □ 3 1 to 3 months | ¹⁶ ☐ Place not meant for habitation | ₁₁□ Other: | | | | |
| Solution 6): 5b. Where were you staying right before you came to that place? 5c. Where were you staying right before you came to that place? 5c. Where were you staying right before you came to that place? 5c. Emergency shelter, include 2c. Transitional Housing for 4c. Homeless 5c. Homeless 6c. Hospital 5c. Housed 6c. Hospital 5c. Refused 6c. Refused 6c. Refused 6c. Refused 6c. Refused 6c. Refused 6c. Stay with family member 6c. Stay with friend 6c. Hotel/motel paid for by self 6c. Place not meant for habitation 6c. Car, street, boat) 6c. How long since you last had a regular place to stay? 6c. More than 1 week, but less than 1 month 6c. I lo 3 months | (car, street, boat) | | | | | |
| 5b. Where were you staying right before you came to that place? Emergency shelter, include 2 Transitional Housing for 3 Permanent housing for homeless | | | , ask the following | question - OTHERWISE SKIP TO | | |
| #☐ Emergency shelter, include motel voucher Homeless hom | | | o that place? | | | |
| Substance abuse treatment facility Jail, prison, detention bull Don't know substance abuse facility Room, apartment, house facility The Hotel/motel paid for by self for the Hotel Foster care home Place not meant for habitation for habitation for the Hotel for the | □ Emergency shelter, include | | | ₃ □ Permanent housing for | | |
| treatment facility Jail, prison, detention Don't know Refused | | | | | | |
| Jail, prison, detention facility □ Apartment or house owned rented □ Stay with friend □ Hotel/motel paid for by self □ Place not meant for habitation (car, street, boat) □ How long since you last had a regular place to stay? □ 1 week or less □ Don't know □ Refused □ Refused □ Refused □ Stay with family member □ Foster care home □ Foster care home □ Hotel/motel paid for by self □ Foster care home □ The long since you last had a regular place to stay? □ 1 week or less □ Don't know □ Refused □ Refused □ Stay with family member □ Foster care home □ The long stay with family member □ Foster care home □ The long stay with family member □ Foster care home □ The long stay with family member □ Foster care home □ The long stay with family member □ Foster care home □ Long Stay with family member □ Foster care home | 4 Psychiatric facility | | | 6 Hospital | | |
| Room, apartment, house 11 □ Apartment or house owned 12 □ Stay with family member rented 3 □ Stay with friend 14 □ Hotel/motel paid for by self 15 □ Foster care home 17 □ Other: (car, street, boat) 3 □ How long since you last had a regular place to stay? 1 □ 1 week or less 2 □ More than 1 week, but less than 1 month 3 □ 1 to 3 months | ¬❑ Jail, prison, detention | | omey | ₃ □ Refused | | |
| rented 3 Stay with friend 14 Hotel/motel paid for by self 15 Foster care home 6 Place not meant for habitation 17 Other: (car, street, boat) 6. How long since you last had a regular place to stay? 1 1 week or less 2 More than 1 week, but less than 1 month 3 1 to 3 months | | - | | | | |
| 3□ Stay with friend 14□ Hotel/motel paid for by self 15□ Foster care home 17□ Other: (car, street, boat) 3□ How long since you last had a regular place to stay? 1□ 1 week or less 2□ More than 1 week, but less than 1 month 3□ 1 to 3 months | | 11 Apartment or he | ouse owned | 12 Stay with family member | | |
| (car, street, boat) 6. How long since you last had a regular place to stay? 1 1 week or less 2 More than 1 week, but less than 1 month 3 1 to 3 months | Stay with friend | ₁₄ロ Hotel/motel pai | d for by self | ₁₅□ Foster care home | | |
| (car, street, boat) 6. How long since you last had a regular place to stay? 1 1 week or less 2 More than 1 week, but less than 1 month 3 1 to 3 months | □ Place not meant for habitation | ₁₂□ Other: | | | | |
| 1 1 week or less 2 More than 1 week, but less than 1 month 3 1 to 3 months | (car, street, boat) | | | | | |
| | 6. How long since you last had a regular place to stay? 1□ 1 week or less 2□ More than 1 week, but less than 1 month 3□ 1 to 3 months | | | | | |
| | | | | | | |

| regular place to stay (including | ime in the past 3 years have you been without a right now)? ₂□ 2-3 times ₃□ 4 or more times | | | |
|--|---|--|--|--|
| 8. What caused you to become ho a. □ employment/financial reason b. □ housing issues c. □ medical/disability problems d. □ forced to relocate from hom | ons e. □ family problems f. □ natural/other disasters g. □ recent immigration | | | |
| 9. What City do you usually live in | ? | | | |
| 10. How long have you lived in Voa. □ one week or less | olusia County? d. □ More than 3 months, less than 1 year | | | |
| b. 🛚 more than 1 week, less than 1 | month e. □ one year or longer | | | |
| c. 🚨 one to three months | | | | |
| | ansgender Female to Male ₄□ Transgender Male to Female | | | |
| RACE/ETHNICITY: 12a. Are you Hispanic or Latino? ₁□ Yes ₀□ No | | | | |
| 12b. What is your race? (you may name more than one race) ₁□ American Indian/Alaskan Native ₂□ Asian ₃□ Black/African American | | | | |
| ₄□ Native Hawaiian/Other Pacific | lslander ₅□ White ₅□ Multiracial ⁊□ Other | | | |
| 13a. Do you have a disabling cond | ition? ₁□ Yes ₀□ No | | | |
| 13b. What type of disabling <u>or</u> medical condition do you have? (you may choose more than one condition) | | | | |
| ₁☐ Physical ₂☐ Developmental | ₃☐ Mental Health ₄☐Drug or Alcohol Addiction ₅☐ HIV/AIDS | | | |
| 14. Were you ever a foster care chia. □ Yesb. □ No | ld? □ Refused to Answer | | | |
| 15. EDUCATION: What is the high ₀□ No Schooling Completed | nest level you completed? ₁□ Nursery to 4 th grade ₂□ 5 th grade or 6 th grade | | | |
| ₃ロ 7 th grade or 8 th grade | ₄❑ 9 th Grade ₅❑ 10 th grade | | | |
| - | ₁❑ 12 grade, No Diploma ₃□ High School Diploma | | | |
| ₀ □ GED | ₁₀Ū Post- secondary school | | | |
| SECTION B. <u>Please answer these questions about your family and others staying with you.</u> | | | | |
| 16. Are you: | | | | |
| • | □ Divorced 4. □ Separated 5. □ Widow | | | |
| 7. Do you have any family members who are homeless and with you now? ₁□ Yes ₀□ No If No, SKIP TO QUESTION 26) | | | | |
| 18. If YES, including yourself, other now? (COMPLETE QUES | adults and children, how many family members are <u>homeless</u> STIONS 19-25) | | | |

| if there are children, complete Questions 19-22 | if there are adults, complete Questions 23-25 | |
|---|---|--|
| 19. Girls: How many? | 23. Gender: 23a ₁☐ Male ₂☐ Female 23b ₁☐ Male ₂☐ Female | |
| 20. Girls: Age(s)? 20a 20c 20b 20d | 23c ₁□ Male ₂□ Female | |
| | 24 . Age(s) : 24a 24b 24c | |
| 21. Boys: How many? | | |
| | 25. Veteran? 25a ₁□ Yes ₀□ No | |
| 22. Boys: Age(s)? 22a 22b | 25b ₁□ Yes ₀□ No | |
| 22c 22d | 25c ₁□ Yes ₀□ No | |
| | ☐ Check here if more adults are recorded on the | |
| ☐ Check here if more children are recorded on the back. | back. * If yes, give veteran the Salvation Army Card. | |

SECTION C. Please answer these questions about your experiences.

| 26. Services that you or your family need right now. (CHECK ALL THAT APPLY) | | | | |
|---|-----------------------------------|---|--|--|
| a. 🗆 Food | g. □ Criminal justice/legal aid | □ substance abuse service | | |
| b. D Housing placement | h. Education | m. □ employment | | |
| c. | I. ☐ Health care | n. ☐ case management | | |
| d. □ Temp. housing/aid | j. ☐ HIV/AIDS service | o. ☐ daycare/child care | | |
| e. □ Transportation | k. Mental health care | p. 🗖 outreach. | | |
| f. Consumer assistance | | q. 🛘 Other: | | |
| | yed at any shelter or housing pro | make about housing or services for ogram? Have you been helped by a | | |
| | | | | |
| | | | | |
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