



42458

January 2011 Georgia Housing Status Survey

All this week, agency staff and volunteers around Georgia are asking people about their housing situations and various factors that affect people's ability to get housing. Your answers will be kept in the strictest confidence and will be grouped with all of the surveys collected in the state this week. Your name will not be recorded on the survey. It will only take about 10 minutes to complete. Your participation... yes or no... will not affect your services in any way. If you have questions about the survey, please contact: Lindsey Stillman, Dept. of Community Affairs - 404-327-6813

Survey Location: _____

*Please use black or blue ink
to complete this form.*

2 5
Like This

2 5
Not Like This

Like This

Not Like This

1. What are your initials?

2. What is your date of birth? / /

3. In what type of place did you spend the night of Sunday, January 23rd?

- My own house or apartment
- With friends or relatives in housing
- Transitional housing
- Hotel/Motel
- Abandoned building
- Emergency or domestic violence shelter
- On the street, under a bridge, etc.
- In a car or other vehicle
- Group home or Personal Care Home
- Prison/jail
- Medical/Psychiatric hospital or facility
- Detox or Treatment facility
- Camping, other than recreational
- Farm structure
- Permanent Supportive Housing

Other (describe) _____

4. If, you stayed in a hotel or motel on the night of Sunday, January 23rd, answer A and B below.

A. Do you expect to be able to stay there for at least the next 2 weeks?

- Yes
- No
- Don't Know

B. Is your hotel/motel stay being paid for by an agency, church or other service provider?

- Yes
- No
- Don't Know

5. If, you stayed in a house or apartment, or with friends or relatives in their house or apartment on the night of Sunday, January 23rd, answer A, B, C, and D below.

A. Is that your permanent place to stay?

- Yes
- No
- Don't Know

C. Do you expect to be able to stay there for at least the next 2 weeks?

- Yes
- No
- Don't Know

B. Is the house or apartment in safe and livable condition?

- Yes
- No
- Don't know

D. Do you currently receive any type of rental subsidy or rental assistance from an agency? Yes No Don't Know

If yes, is this rental subsidy temporary or permanent?

- Permanent
- Temporary
- Don't know

6. In what city/county did you spend the night of Sunday, January 23, 2011? _____

7. Do you consider yourself homeless at this time? Yes Go To 7a, b, c No Don't Know Skip to back page

A. In what county/city did you first become homeless?

- Current city/county
- Elsewhere in Georgia
- Elsewhere in the U.S.
- Don't know
- Neighboring city/county
- Neighboring state
- Outside the U.S.

B. How long have you been homeless?

- less than 30 days
- 6 months to one year
- 30-90 days
- More than 1 year
- 3 to 6 months

C. Including this time, how many times have you been homeless in the past three (3) years?

8. Did you have other household members staying with you on January 23, 2011?

Yes No → please go to question #9

For each family member (not including yourself) who was with you the night of January 23rd, please tell us his/her age, gender, and relationship to you. If you are currently staying with friends or family, do NOT include those individuals whose home you are currently staying in.

	Initials	Age (Years)	Gender	Relationship
Person #1	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Spouse/Partner <input type="radio"/> Child <input type="radio"/> Other (Describe) <input type="text"/>
Person #2	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Spouse/Partner <input type="radio"/> Child <input type="radio"/> Other (Describe) <input type="text"/>
Person #3	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Spouse/Partner <input type="radio"/> Child <input type="radio"/> Other (Describe) <input type="text"/>
Person #4	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Spouse/Partner <input type="radio"/> Child <input type="radio"/> Other (Describe) <input type="text"/>

9. Have you ever served in the U.S. military? Yes No

10. Have you experienced any of the following, either now or in the past? (Check all that apply)

- Severe mental illness
- HIV/AIDS
- Chronic medical condition
- Chronic drug abuse
- Chronic alcohol abuse
- Physical disability
- Kicked out of the home BEFORE the age of 18
- Kicked out of home AFTER the age of 18
- Aged out of Foster Care
- Felony conviction
- Family Violence
- Involvement in Foster Care (as a parent)
- Involvement in Foster Care (as a youth)
- Left home voluntarily before the age of 18
- Recently discharged from an institution (such as a hospital or prison)
- Decline to Answer

11. Have you been to the hospital emergency room in the past six (6) months? Yes No Decline to answer

Skip to question #13

12. How many times have you been to the emergency room in the past six (6) months?

Number of times

13. Did family violence play a part in your current housing difficulties? Yes No Decline to answer

14. In the past 30 days, have you worked for pay... Full-time Part-time Day Labor Not at all

15. Do you currently receive any of the following benefits or services? (Check all that apply)

- Food Stamps (SNAP)
- SSI
- TANF
- Unemployment
- PeachCare
- Social Security
- SSI Disability
- Workman's Comp
- Veterans Benefits
- Medicaid
- DHS Independent Living Services (ILP)
- Mental Health or Addiction Services
- Homeless Prevention Rapid Re-Housing (HPRP)
- GeorgiaCares (for Seniors)
- Housing Choice Voucher (Section 8)
- Veterans Supportive Housing Voucher (VASH)

Are you... Male
 Female
 Transgender

Do you consider yourself to be Hispanic or Latino?
 Yes No

Are you... White Black/African American
 Asian Other or Multiracial
 American Indian

Those are all of the questions we have. Remember, all of your answers are completely confidential. They will not be shared with anyone. Thank you!!!!