



**HAVE YOUR
SAY BECAUSE
YOUR OPINION
MATTERS!**

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Seniors Aging OUT: Safe Communities for LGBTQ2+

Creating inclusive, welcoming spaces and services for LGBTQ2+ older adults

BC Community Response Networks is working with Island Health and local communities to raise awareness of health and service issues for LGBTQ2+ seniors. The limited research about LGBTQ2+ seniors tells us:

- Many LGBTQ2+ seniors do not have the informal support networks of children and extended families that other seniors might have.
- They have higher rates of disability compared to other older adults.
- They are resilient and live full lives, building strong communities despite challenges.
- They feel anxious about increased health care needs related to aging and about how they will be treated by service providers.

Information from the survey and some in-person interviews will be used to plan for health and community services for Vancouver Island LGBTQ2+ seniors. All information you provide is confidential. The information from these surveys will be summarized. Any information that could potentially identify you will not be disclosed.

Definitions:

- **Public health services:** services or programs you do not pay for directly. They are fully or partially covered by government and MSP premiums.
- **Private health services:** services you do pay for directly.
- **Community services:** services or programs that are provided by community centres and community (non-profit) organisations. There may or may not be a fee for a program.

If you have completed this survey by hand, you may return it:

By mail to: Jane Osborne, c/o Volunteer Cowichan, 200 Craig St, Duncan, BC V9L 5G3

In person to: The project member who contacted you.

If you have questions about this survey, please contact:
Jane Osborne, Survey Team Lead at 604.363.5370 or jane.osborne@bccrns.ca

SECTION 1:
General information

1. **Do you consider yourself a member of the Lesbian, Gay, Bisexual, Transgender, Queer, Two-spirited (LGBTQ2+) community?** *Please check one:*

- Yes No No, but I am an ally, caregiver, supporter
 Prefer not to say

2. **How do you identify in terms of gender?** *Please check one:*

- Male Female Non-binary/third gender
 Transgender Prefer to self-describe _____
 Prefer not to say

3. **How do you identify in terms of sexual orientation?** *Please check one:*

- Straight/Heterosexual Gay or Lesbian Bisexual
 Prefer not to say Prefer to self-describe _____

4. **What is your age?** *Please check one:*

- 55-59 70-74 85-89
 60-64 75-79 90+
 65-69 80-84

5. **Where do you live on Vancouver Island?** *Please check one:*

- Victoria, Saanich Peninsula, Western Communities, Sooke, Port Renfrew, Saltspring, Galliano, Mayne, Saturna, South or North Pender Islands, or close by.
 Cowichan Valley (Shawnigan Lake to Ladysmith), Lake Cowichan, Thetis or Penelakut.
 Nanaimo Region, Parksville, Qualicum, Port Alberni, Tofino/Ucluelet, Courtney/Comox, Gabriola, Valdez, Denman, Hornby or close by.
 Campbell River, Port McNeill, Port Hardy, Port Alice, Quadra, Texada, Lasqueti, Alert Bay, Sointula, or close by.
 Don't know/not sure. Homeless.

To help clarify which region you live in, please write your postal code here _____

6. **How would you describe your community?** *Please check one:*

- Urban Rural Rural and remote
 Other _____

SECTION 2: Using Public Health Services as a member of the LGBTQ2+ community.

Think about the times you or someone you support has used public (government or MSP funded) health services and then respond to these questions.

7. If you have used **public home care or home support services** to assist you to remain independent in your home, has your experience been positive, negative or mixed? *Please check one.*

Positive

Negative

Mixed

8. Did the people providing the service know you were **LGBTQ2+**? *Please check one:*

Everyone knew

Some knew

No one knew

I'm not sure

9. If you used these services in the **last 5 years**, when was it? *Please check one:*

Within the last year

Within last 2 years

Within last 5 years

Comments:

If you have used services within the last 5 years, please tell us about an experience (either positive or negative) that really stands out for you.

10. If you have used publicly subsidised residential care, e.g. hospital, intermediate or long term, palliative, assisted living, was your experience positive, negative or mixed?
Please check one:

- Positive Negative Mixed

11. Did the people providing the care and the other residents know you were LGBTQ2+?
Please check one:

- Everyone knew Some knew No one knew I'm not sure

12. If you used these services in the last 5 years, when was it? Please check one:

- Within the last year Within last 2 years Within last 5 years

Comments:

If you have used services within the last 5 years, please tell us about an experience (either positive or negative) that really stands out for you.

SECTION 4: Using Services provided by the Community (not-for-profit) Sector as a member of the LGBTQ2+ community. Think about the times you (or someone you support) have used community-based services to remain living independently in your home and then respond to these questions.

21. If you have used community-based home support services (supported transportation, meals, grocery-shopping, friendly visiting, minor maintenance, etc.) to assist you to remain independent in your home, has your experience been positive, negative or mixed? Please check one:

- Positive Negative Mixed

22. Did the people providing the service know you were LGBTQ2+? Please check one

- Everyone knew Some knew No one knew I'm not sure

23. If you used these services in the last 5 years, when was it? Please check one

- Within the last year Within last 2 years Within last 5 years

Comments:

If you have used services within the last 5 years, please tell us about an experience (either positive or negative) that really stands out for you.

SECTION 5:

Some final questions about you and your community:

27. Do you feel part of a community where you live? Please check one:

- Very strong sense of community
- Somewhat strong sense of community
- Not a very strong sense of community
- No sense of community at all

28. Do you have family or friends in your community who provide you with a support network? (These are people you could turn when you need help.)

Please check one:

- Yes
- No
- Not sure/don't know

29. Do you feel you are valued and respected as an LGBTQ2+ senior in your community on Vancouver Island?

Please check one:

- Always
- Frequently
- Occasionally
- Rarely
- Never

30. Overall, do you feel that there is a high or low level of awareness of the needs of LGBTQ2+ seniors in your community? Please check one:

- Very good awareness
- Somewhat good awareness
- Not enough awareness
- Don't know

31. Finally, people have many different cultural backgrounds and characteristics (other than age, gender or sexual orientation), e.g. race, ethnicity, ability/disability, education, income, etc. We know some of these may also be factors in how we are treated by public, private and community service providers or fellow residents/citizens. Please check all that apply to you:

- Aboriginal/First Nations
- Recent immigrant
- Mobility / physical disability
- Mental disability
- Other: _____
- Person of colour
- English as a second language
- Cognitive disability
- Low income

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32. What do you need to see, feel or experience to have the sense of being cared for by health care systems/providers and community organizations?

TWO LAST ITEMS...

Do you wish to be involved in future working group meetings for LGBTQ2+ seniors?

Yes

No

Do you wish to be *entered into the draw to receive a \$50 gift certificate from a local business?*

Yes

No

If you answered 'yes' to either question, please complete the information below.

Name:

E-mail:

Telephone number:

Thank you!

Your opinions are much appreciated and will help make Vancouver Island communities more inclusive and welcoming for LGBTQ2+ people.