

## Sample tenant survey

The purpose of this anonymous survey is to assess the level of interest among tenants in having the choice to live in a smoke-free environment. Any future smoke-free policy that might be adopted would not result in tenants being evicted for being smokers, would not force anyone to quit smoking and would not prevent smokers from renting accommodation.

Please check the answer that best describes you and your situation.

**1. Do you or anyone else in your household smoke cigarettes, cigars or a pipe/waterpipe?**

- Yes, regularly (daily or weekly)
- Yes, occasionally (less than weekly)
- No

**If yes, do you or any household members smoke indoors?**

- Yes
- No

**2. Which of the following statements best describes the rules about smoking inside your home:**

- Smoking is **not allowed anywhere** in my home or on the balcony/porch/patio
- Smoking is **only allowed outside** on the balcony/porch/patio
- Smoking is **allowed only in certain rooms** inside my home
- Smoking is **allowed anywhere** inside my home
- Other (specify) \_\_\_\_\_

**3. How often have you smelled tobacco smoke in your home that comes from another unit or from outside?**

- Never
- Occasionally
- Very often
- Always

**If you smell smoke in your home, has the smoke impacted your health (i.e.; does it give you headaches, make your eyes water or burn, make you cough, or make you feel ill in any way)?**

- Yes
- No

**If you smell smoke in your home, where does it most often come from?**

- From someone smoking outside on a neighbouring balcony/porch/patio
- From someone smoking inside a neighbouring unit
- From someone smoking outside on the building property
- From some other location (specify) \_\_\_\_\_

**If you smell smoke, have you ever complained to your landlord about it?**

- Yes
- No
- Other (specify) \_\_\_\_\_

**4. Does anyone living in your unit suffer from chronic illnesses, such as asthma, chronic bronchitis, chronic obstructive pulmonary disease (COPD), heart disease, diabetes, arthritis or cancer?**

- Yes
- No
- Maybe
- Don't know

**5. Are any of the members who currently live in your unit:**

- children younger than the age of 12?
- seniors older than the age of 65?

**6. Do you think second-hand smoke is harmful to people's health?**

- Yes
- No
- Don't know

**7. Would you be interested in living in a building where all smoking was completely banned, including inside private units, on patios, balconies and on all property grounds?**

- Yes
- No
- Don't know

**If no, which spaces would you like to see included in a ban (check all that apply)?**

- inside private units
- on patios
- on porches
- on balconies
- on outdoor property ground
- all of the above but only related to certain floors or wings of the building
- I don't want to see smoking banned anywhere.
- Other (specify) \_\_\_\_\_

**Please note:** In compliance with Alberta laws, smoking is currently not allowed in the common areas of our building, including hallways and elevators. The law also prohibits smoking in any enclosed common patios, pools, other recreation areas and enclosed parking garages. There are five metre smoke-free buffers around doorways, air intakes or public windows that can be opened. These areas will remain smoke-free by law regardless of the outcome of this survey.

**8. If we were to designate smoke-free wings, floors or buildings in your facility that would encompass individual units, balconies, porches, and/or patios, would you be interested in:**

- moving to the smoke-free area?
- moving away from the smoke-free area?
- Unsure/depends (specify) \_\_\_\_\_

**9. Are you opposed to or supportive of adopting some form of smoke-free policy for our building?**

- Strongly supportive
- Supportive
- Opposed
- Strongly opposed
- Other (specify) \_\_\_\_\_

**Comments:**

**Optional:** Floor number \_\_\_\_\_ Unit number \_\_\_\_\_

Thank you for completing this survey – we value your input.