## Muskoka Family Focus: Parent Survey

Welcome and thank you for taking the time to answer a few questions about parenting support in Muskoka. This survey will be brief (approximately 5-10 minutes). To thank you for your time and feedback, your name, with your permission, will be entered into a draw to win 1 of $3 \$ 50$ gift cards.

If you have any questions at all about the survey, please contact Carol Corriveau-Truchon at Muskoka Family Focus: 705-645-3027, ext. 212 or by email at ctruchon@muskokafamilyfocus.com.

## Thanks again!

1. Where do you live in Muskoka?
$\qquad$ Gravenhurst
_Huntsville
___ Bracebridge Other - where do you live? $\qquad$
2. How old are you?

| $15-19$ |  |
| :--- | ---: |
| $20-24$ | - |
| $25-29$ |  |
| $30-34$ |  |$\quad-$| $35-39$ |
| ---: |
| $40-44$ |$\quad-45+$

3. How many children do you currently have?
__ None __ 1

More than 2?
___ None - currently pregnant $\qquad$ $\longrightarrow$ How many? $\qquad$

## Are you ...?

$\qquad$
$\qquad$ Father
4. What services and programs for young children and their families are you aware of in Muskoka?

Program/Service 1 $\qquad$ Program/Service 2 $\qquad$
Program/Service 3 $\qquad$ Program/Service 4 $\qquad$
Program/Service 5 $\qquad$
5. Where do you usually access services and programs for your family?
$\qquad$ Gravenhurst
Bracebridge
$\qquad$ Huntsville
$\qquad$
$\qquad$ Other, where do you usually access services?
6. Below is a list of organizations or agencies that provide supports and/or services to parents. Which of these were you aware of and/or have used?

| Organization/ Agency | No <br> I'm not aware of <br> this organization / <br> agency | Yes <br> I am aware | Yes <br> I used in the <br> past (more than <br> 3 months ago) | Yes <br> (in the past 3 <br> months) |
| :--- | :--- | :--- | :--- | :--- |
| Muskoka Family Focus (e.g., Ontario Early Years <br> Centre programs, Strengthening Families, Make <br> the Connection, Triple P, Make the Connection, <br> Baby Talk, dinner programs) |  |  |  |  |
| One Kid's Place (e.g., speech and language, <br> physiotherapy, occupational therapy, infant <br> hearing program, autism services) |  |  |  |  |
| Christine's Place (e.g., pregnancy support, Circle <br> of Security, Christine's Cupboard) |  |  |  |  |
| Simcoe Muskoka Family Connexions (e.g., <br> child and youth mental health, counselling walk- <br> in clinic, caregiver resources, child protection <br> services) |  |  |  |  |
| Hands - The Family Help Network (e.g., autism <br> services, child and youth mental health, <br> developmental support services, infant and child <br> development services) |  |  |  |  |
| District of Muskoka Community and Social <br> Services (e.g., financial assistance, child care <br> subsidies, summer camp, The Nest) |  |  |  |  |
| Simcoe Muskoka District Health Unit (e.g., <br> Healthy Babies, Healthy Children, Triple P, <br> Breastfeeding Place, Health Connection) |  |  |  |  |
| Public Library Programs (e.g., Tales for Twos, <br> Storyhour) |  |  |  |  |
| Community Recreation Programs (e.g., Parent <br> and Tot Swim, DrumFit, strollercise) |  |  |  |  |

7. How much do each of the following prevent you from going to programs/services or getting the resources you need?

|  | Not at all | A little | Somewhat | A lot |
| :--- | :--- | :--- | :--- | :--- |
| Lack of transportation |  |  |  |  |
| Fees/costs/money |  |  |  |  |
| Work demands |  |  |  |  |
| Lack of time |  |  |  |  |
| Feeling uncomfortable going to unknown places/services |  |  |  |  |
| Not knowing anyone there or not having anyone to go with |  |  |  |  |
| It's hard to ask for help/assistance |  |  |  |  |
| Is there anything else that has stopped you from using any <br> programs, services or resources? |  |  |  |  |

8. What do you think is missing in Muskoka as far as services, programs and resources for parents? What services, programs or resources would you like to see in your area?

Service/Resource 1 $\qquad$ Service/Resource 2

Service/Resource 3 $\qquad$ Service/Resource 4 $\qquad$
Service/Resource 5 $\qquad$
We would like to know how interested parents of young children are in a "peer parental support program". That is, this program could involve someone coming into your home to provide support or providing support outside of the home or in the community, a support group, and/or online support.

The person coming into your home would also be a parent but not necessarily a "professional"; this person could go through a "matching" process so that it is someone you are comfortable with. This person could help you out in different ways. For example, this could mean having an extra pair of hands -- helping with errands or chores or other children so that you can have 1-on-1 time with one child.

Or, it could mean providing you with information about programs and services in the community, or going with you to a program so you don't have to go alone. The peer parent helper could also help in setting routines with your children. This helper could also simply be someone to talk to and share time with.

We're wondering what parents think of such a program.
9. How likely would you be to use different parts of such a program?

|  | Not at all <br> likely | A little <br> likely | Somewhat <br> likely | Very likely |
| :--- | :--- | :--- | :--- | :--- |
| In-home peer parent (having someone come into your <br> home to help out) |  |  |  |  |
| Support outside of the home or in the community (e.g., <br> bringing meals to you - "meal train", accompanying you <br> to a program, help with errands) |  |  |  |  |
| Support group (meeting with other parents to exchange <br> ideas, information, or simply to chat) |  |  |  |  |
| Online support (on-line chat, website resources) |  |  |  |  |

10. What would prevent you from using a peer parental support program? (Please check all that apply.)
$\qquad$ Do not feel the need Lack of time No interest Other, please specify:

In the near future, we will be doing some planning with the community around programming needs for families with children aged $0-6$. We may be doing some community meetings, focus groups, or telephone interviews. Would you have any interest in being involved in the community planning? You can decide how much, or how little, you want to participate.
$\qquad$Not sure
$\qquad$
If you're willing, can you please leave us your contact information? Your name will be entered into a prize draw (for 1 of $3 \$ 50$ gift cards). Your name/contact info will ONLY be used should your name be drawn OR you have answered "yes" or "not sure" about future involvement.

Name: $\qquad$
Home phone: $\qquad$ Cell phone: $\qquad$
Email:

