



South East Grey
Community Health Centre



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**Appendix D: Grey Bruce Community Volunteer Income Tax Program
Case Study, Telephone Client Survey Questionnaire¹**

¹ This survey questionnaire has been adapted from the Final Measurement Tool developed by Crystal Ferguson, University of Waterloo, December 7, 2020 with permission for our Case Study.

Community Volunteer Income Tax Program - Evaluation – Spring 2023

Telephone Survey Introduction:

Hello, is this [insert client's name]?

If no – Would I be able to speak to [client's name]?

If no – try calling back another time

If yes -> Hi [insert client's name]. This is [insert interviewers' name] calling from the free tax program. We are just calling today to see if we could get your feedback about the program to help us make the program better. It will take about 5 – 10 minutes. Would you be willing to answer a few questions over the phone for us?

If yes – Thank you. Does right now work for you?

If yes – proceed to Consent Section.

If no – “When would be a better time to reach you?”

Record Details: _____

And follow-up as per evaluation protocol.

Consent:

To get started, there is some information that I would like to read to you to make sure you are comfortable on our call today and get your consent to participate in the evaluation.

As I mentioned, we are trying to collect feedback from people who have used the free tax service so that we can improve the program, understand the program's impact, and report on the successes and challenges of the program. There are about 18 very short questions and you will have an opportunity at the end to make any further comments. All of your personal information will be kept confidential, to the extent permitted by law. We won't share your identity or anything that would identify you in any of the reports about the program. Your choice to participate is voluntary and your choice about participation will not change your ability to access any programs and services [The Meeting Place Tobermory/SEGCHC]. If at any time you decide you do not want to participate or you want to stop the interview, you are free to stop at any time.

Do you have any questions about the information I just read? *(Answer any questions)*

Do you agree to participate in the evaluation? Yes No

Would it be okay if I started the questions now?

Interviewer to complete:

Date: _____

Client ID: _____

Consent obtained by interviewer (name): _____

Interviewer Signature: _____

Questions:

Section A: For the following questions, you will be asked about changes which you feel might have occurred because of your participation in the free tax program. After you decide how much change occurred, if any at all, I will ask you to rate the amount of change. There are no right or wrong answers, we are just looking to understand your experiences.

1.a.) How does the free tax program change how connected you feel to your community?

- Decreases connection Increases connection No change

(Interviewer: If “no change” skip question 1.b.)

1.b.) Would you say the “*decrease/increase*” in connection is slight, moderate or a lot?

- slight moderate a lot

2.a.) How does the free tax program change your stress level?

- Decreases stress Increases stress No change

(Interviewer: If “no change” skip question 2.b.)

2.b.) Would you say the “*decrease/increase*” in stress is slight, moderate or a lot?

- slight moderate a lot

3.a.) How does the free tax program change your confidence in your ability to file your tax return?

- Decreases my confidence Increases my confidence No change

(Interviewer: If “no change” skip question 3.b.)

3.b.) Would you say the “*decrease/increase*” in confidence is slight, moderate or a lot?

- slight moderate a lot

4.a.) How does the free tax program change your confidence in your ability to handle your taxes, in general?

- Decreases my confidence Increases my confidence No change

(Interviewer: If “no change” skip question 4.b.)

4.b.) Would you say the “*decrease/increase*” in confidence is slight, moderate or a lot?

- slight moderate a lot

Section B: For the following questions, you will be asked about any benefits you might have received because you participated in the free tax program. Again, there are no right or wrong answers.

7.a.) Did using the free tax program help you afford any basic necessities? Some examples might include: food, rent, mortgage, heat, electricity, medications, transportation, etc.

No Yes Unsure *If “no” or “unsure” skip Question 7.b.*

7.b.) Would you be able to tell us which necessities?

Check all that apply:

Food Rent Mortgage Utilities Medications Transportation

Other (please specify): _____

8.a.) Did using the free tax program help you access any government income benefits *for the first time*? Some examples might include: Canada Child Benefits (CCB), Guaranteed Income Supplement (GIS), Old Age Security (OAS), Ontario Trillium Benefit (OTB), GST Credit, etc.

No Yes Unsure *If “no” or “unsure” skip Question 8.b.*

8.b.) Would you be able to tell us which benefits?

Check all that apply:

Canada Child Benefits (CCB) Guaranteed Income Supplement (GIS)
 Old Age Security (OAS) Ontario Trillium Benefit (OTB)
 GST Credit Seniors Housing Property Tax Grant (OSHPTG)

Other (please specify): _____

Section C: We only have a few questions left. The next questions ask for some personal information about you so we can better understand who we are serving and how different people experience the free tax program. If you prefer not to answer a question, please say so.

10. How old are you? _____ Prefer not to answer

12.a. Were you born in Canada? No Yes Prefer not to answer

(If yes, skip question 12.b.)

12.b. If no, what year did you move to Canada? _____ Prefer not to answer

13. What is your postal code? _____ Prefer not to answer

14. What is your gender? _____ Prefer not to answer

15. What is the main source of your income?

- | | |
|---|---|
| <input type="checkbox"/> Canada Pension Plan – Disability (CPP – D) | <input type="checkbox"/> Canada Pension Plan (CPP) |
| <input type="checkbox"/> Old Age Security (OAS) | <input type="checkbox"/> Guaranteed Income Supplement (GIS) |
| <input type="checkbox"/> Ontario Works | <input type="checkbox"/> Ontario Disability Support Program |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Self-employment <input type="checkbox"/> Other |
| <input type="checkbox"/> Prefer not to answer | |

16. While we are all humans, how our race is perceived has important consequences including how we are treated by different individuals and institutions. Which race category best describes you? ⁱ Check all that apply:

Response Options	Examples
<input type="checkbox"/> Indigenous	First Nations, Metis, Inuk/Inuit descent
<input type="checkbox"/> White	European descent
<input type="checkbox"/> Black	African, Afro-Caribbean, African Canadian descent
<input type="checkbox"/> East or Southeast Asian	Chinese, Korean, Japanese, Taiwanese descent, or Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent
<input type="checkbox"/> Latino	Latin American, Hispanic descent
<input type="checkbox"/> Middle Eastern	Arab, Persian, West Asian descent (e.g. Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish)
<input type="checkbox"/> South Asian	South Asian descent (e.g. East Indian, Pakistani, Bangladeshi, Sri Lankan, Indo-Caribbean)
<input type="checkbox"/> Another race category	
<input type="checkbox"/> Do not know	
<input type="checkbox"/> Prefer not to answer	

18. Do you have any comments or anything you would like to say about the free tax program?

That is the end of the questions for this evaluation. Thank you so much for participating.

ⁱ Canadian Institute for Health Information. Proposed Standards for Race-Based and Indigenous Identity Data Collection and Health Reporting in Canada. Ottawa, ON: CIHI; 2020.