CIREI SMART HOME SURVEY

Resident or Specialist

Please circle the one that applies

For each question, please circle the option of your choice

You may scribble something out if you made a mistake, but please ensure your correct choice is clear

Nonspecific Acceptance	How interested are you in incorporating smart home assistive technology or robotics into your daily life?				
	Not at all	Slightly	Moderately	Very	Extremely
Performance Expectancy	To what extent do you believe smart home assistive technology or robotics could enhance your daily activities?				
	Not at all	Slightly	Moderately	Very	Extremely
Effort Expectancy	How confident are you in your ability to operate smart home assistive technology or robotics for simple tasks?				
	Not at all	Slightly	Moderately	Very	Extremely
Ageism/ prejudice	To what extent do you feel excluded from things because of your age?				
	Not at all	Slightly	Moderately	Very	Extremely
Loss of Independence	To what extent do you feel that you are becoming less independent as you get older?				
	Not at all	Slightly	Moderately	Very	Extremely
Technology anxiety	How apprehensive do you feel about using modern, computerised technology?				
	Not at all	Slightly	Moderately	Very	Extremely
Privacy Concerns	How risky do you feel it is to disclose personal information to smart home assistive technology or robotics providers?				
	Not at all	Slightly	Moderately	Very	Extremely
Compatibility	How difficult do you feel it would be to use smart home assistive technology or robotics with your current technology (eg. smartphone, tablet)?				
	Not at all	Slightly	Moderately	Very	Extremely
Access to support	How much help could you get with technology difficulties, if you needed it?				
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If any of the questions don't make sense, or you need help with something, feel free to ask one of us!