	ida County	United Way	punties
1. Where do you live?	alton County	Okaloosa County	O Other
2. What is the ZIP code you live	in?		
3. What is your residency status	s?		
O Permanent, Year-Round	Seasonal	or "Snow Bird"	
4. What best describes your cu	rrent living situation	on?	
 Own Rent Public housing Co-habitating (currently living or someone else's roof) 5. How long have you lived in the Less than 1 year 	plac Tem Living witho his community? 1-3 years	porarily living in a s g outside (beach, te out shelter 3	shelter ent, completely -5 years
5-10 years	○ 10-20 years	()20) years and over
6. What gender do you identify v	with?		
	emale	Other	
7. What is your race?		◯ White/Caucasia	an
 Asian 			
Native Hawaiian/Pacific Island	er	Other	
American Indian/Alaska Native	9	-	

8.	Are you	of Hispanic/Latino	origin or	descent?
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⊖ Ye	S	⊖ No						
🔵 Ur	t is your age? nder 18 0-59	○ 18-29○ 60-69		○ 30-39 ○ 70-79	○ 40-49○ Over 80			
10. WI	nat is your highes	t level of education	on?					
	ss Than High Scho	ol	\bigcirc	Associate's/Tec	chnical			
O Hig	gh School/GED		() E	Bachelor's Deg	ree			
\bigcirc So	me College		\bigcirc (Graduate's Deg	ree or Higher			
11. Wh	at is your current	employment sta	tus?	(Check all that	apply)			
Dis	abled/Unable to W	ork		Retired				
Em Em	ployed Full-Time			Seasonal	Worker			
En En	ployed Part-Time		Student					
- Ho	memaker			Self-Emplo	byed			
Ve	teran			Unemploy	ed			
12. Ho	w many children	under the age of	18 liv	es in your ho	usehold?			
0 (
0 1-2	2							
3-5	5							
⊖ Mo	O More than 5							
13. Ho	13. How many individuals over the age of 65 live in your household?							
0		○ 1-2		\bigcirc	More than 2			

14. What is your annual family (household) income?

- Under \$15,000
- Between \$15,000 and \$29,999
- Between \$30,000 and \$49,999
- Between \$50,000 and \$74,999
- Between \$75,000 and \$99,999
- Between \$100,000 and \$150,000
- Over \$150,000

15. Thinking about local elections, in the past five years, how often would you say you voted?

- Always
 - Most of the time
 - About half the time

Seldom

16. Is someone in your household currently incarcerated or has been incarcerated in the past?

\bigcirc	Yes	\bigcirc	No
~		\sim	

17. Please choose the statement that best represents your access to food.

- \bigcirc I am able to provide adequate food for me and my family.
- I can only afford to purchase basic food items.
- \bigcirc At times, I may have to choose between paying bills and buying food.
- I have access to food though a local food pantry.

18. How do you usually get around your community or surrounding communities for shopping, visiting the doctor, running errands, etc.? (Check all that apply)

Walk
Drive yourself
Have family or friends drive you
Take a taxi or ride-sharing service (Uber, Lift, etc.)
Use special transportation service, such as one for seniors or persons with disabilities
Use special transportation service, such as one for seniors or persons with disabilities
Use public transportation
Ride a bike

19. How often do you have contact with family, friends, or neighbors who <u>do not</u> live with you? This interaction could be by phone, in-person, email or social media (such as Facebook).

\bigcirc	Multiple times a day	\bigcirc	Once every 2 or 3 weeks
\bigcirc	Every day	\bigcirc	Once a month
\bigcirc	Several times a week	\bigcirc	Less than monthly
\bigcirc	Once a week	\bigcirc	Never

20. Approximately how many hours per month do you volunteer your time to community service? (e.g., schools, voluntary organizations, churches, hospitals, etc.)

\bigcirc	Over 10 hours	\bigcirc	1-5 hours
\bigcirc	6-10 hours	\bigcirc	None

21. Do you think your family is well prepared for a disaster (hurricane, flooding, fire, etc.)?

- Yes, my family has a written plan, enough food and water on-hand that could at least 72-hours, and taken into consideration special needs for infants, older relatives and pets.
- Somewhat, my family has a talked about how to prepare for a disaster, but nothing is written down and limited actions have taken place to prepare my family.
- No, I do not think my family is prepared for possible disasters, but I do not think I need assistance in preparing.
- No. I need assistance in preparing for possible disasters.

22. What do you think are the most important things in a "Healthy Community"?

(Please Select Exactly Three)

Quality education	Walkable and bikeable community
Clean environment (water, air, etc.)	Community services for vulnerable populations (older adults,
Low crime and safe neighborhoods	individuals with disabilities, homeless, etc.)
Access to affordable childcare	Affordable and accessible housing
Low level of childabuse	Healthy food options
Access to quality healthcare and wellness programs	Easy access to birth control and family planning services
Arts and cultural events	Low occurrence of infectious diseases (HIV/AIDS, STDs, flu, tuberculous, etc.)
Access to reliable, accessible and safe transportation	Strong religious/spiritual community
Safe and enjoyable parks, places and buildings	Good employment and entrepreneurship opportunities
Low infant deaths	Access to alcohol and drug treatment
Good place to raise children	Access to mental healthcare
Long life expectancy due to low deaths from preventable diseases (heart disease, stroke, cancer,	Community readiness for emergencies (hurricanes, flooding, disease outbreaks, etc.)
 type 2 diabetes, etc.)	Access to information about community services and
Respect toward different cultures, races, and ages	opportunities
Technology/internet access	Low occurrences of preventable injuries (motor vehicle accidents, falls, drownings, etc.)

$23.\,\mbox{Out}$ of the following, what are the three most important issues in your

community? (Please Select Exactly Three)

Education	Lack of walkable and bikeable sidewalks in community
Environment (water, air, etc.)	Limited community services for vulnerable populations (older adults, individuals with disabilities, homeless, etc.)
Crime	Unaffordable and inaccessible housing
Unaffordable childcare	, and the second s
Child abuse	Limited access to healthy food options
Limited access to healthcare and wellness programs	Limited access to birth control and family planning services
Lack of arts and cultural events	Occurrence of infectious diseases (HIV/AIDS, STDs, flu, tuberculous, etc.)
Unreliable, inaccessible and unsafe transportation	Employment and entrepreneurship opportunities
Limited parks, places and buildings for recreational activities	Limited access to alcohol and drug treatment
Infant deaths	Limited access to mental healthcare
Deaths from preventable diseases (heart disease, stroke, cancer, type 2 diabetes, etc.)	Community readiness for emergencies (hurricanes, flooding, disease outbreaks, etc.)
Disrespect toward different cultures, races, and ages	Limited access to information about community services and
Limited access to technology/internet	opportunities
	Occurrences of preventable injuries (motor vehicle accidents, falls, drownings, etc.)

24. Which of the following unhealthy behaviors in this community concerns you

most? Those behaviors that have the greatest impact on overall community health. (Please Select **Exactly Three**)

Drug use	Texting/using cell phone while driving
Poor eating habits	Unsafe sex
Lack of exercise	Not using birth control
Not seeing a doctor or dentist routinely	Not using seat belts and/or child safety seats
Tobacco use (including e-cigarettes and vaping)	Alcohol use
Not getting "shots" to prevent disease	Being overweight or obese
Dropping out of school	Bad sleep habits

25. How would rate this community as a "Healthy Community?"

- Very healthy
 Healthy
 Very unhealthy
- O Somewhat healthy

26. How would you rate your own personal health?

O Very healthy	\bigcirc Unhealthy
 Healthy 	Very unhealthy
Somewhat healthy	

27. Please rate the following statements.

	Strongly Agree	Agree	Somewhat	Disagree	Strongly Disagree
I am satisfied with the quality of life in this community. (Consider your sense of safety, well-being, participation in community life and associations, etc.)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I am satisfied with the health care system in this community. (Consider quality, access, cost, availability, options in health care, etc.)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
This community is a good place to grow old. (Consider elder-friendly housing, transportation to medical services, churches, shopping; elder day care, social support for the elderly living alone, meals on wheels, etc.)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There is economic opportunity in this community. (Consider locally owned businesses, jobs with career growth, job training/higher education opportunities, etc.)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
There are housing options in this community that are affordable and safe. (Consider closeness to parks, recreation, employment opportunities, grocery stores, medical care, etc.)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
This community is a safe place to live. (Consider residents' perceptions of safety in the home, the workplace, schools, playgrounds, parks, and the mall. Do neighbors know and trust one another? Do they look out for one another?)	\bigcirc	\bigcirc	0	\bigcirc	0
There are networks of support for individuals and families during times of stress and need (Consider neighbors, support groups, faith community outreach, agencies, and organizations).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc